



**United Republic of Tanzania**  
**Ministry of Health and Social Welfare**  
**Department of Social Welfare**

***ASSESSMENT OF THE SOCIAL WELFARE  
WORKFORCE IN TANZANIA***

***Final Report***

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## ABBREVIATIONS

ADSW- Advanced Diploma in Social Work  
AIHA- American International Health Alliance  
BSW- Bachelor of Social Work  
CBO- Community Based Organization  
CDO-Community Development Officer  
CERT- Certificate  
CERT (SW) - Certificate in Social Work  
CSO- Civil Society Organization  
CSW – Commissioner for Social Welfare  
DIP (SW) - Diploma in Social Work  
DSW – Department of Social Welfare  
FGD- Focus Group Discussion  
HIV/AIDS- Human Immune Virus/ Acquired Immune Deficiency Syndrome.  
HR- Human Resource  
HRM- Human Resource Management  
ISW- Local Government Authority  
LGA- Local Government Authority  
MA- Master of Arts  
M&E- Monitoring and Evaluation  
MOHSW – Ministry of Health and Social Welfare  
M Sc – Master of Science  
MSW- Master of Social Work  
MVC- Most Vulnerable Children  
NASW- National Association of Social Works  
NCPA- National Casted Plan of Action  
NGO- Non Governmental Organization  
NMSF- National Multi-sectoral Strategic Framework  
NSGRP- National Strategy for Growth and Reduction of Poverty.  
ODSW- Ordinary Diploma in Social Work



OPRAS- Open Performance Review Appraisal System  
PGD- Post Graduate Diploma  
Ph D- Doctor of Philosophy  
PLHIV- People Living with Human Immune Virus  
PMO- RALG- Prime Ministers' Office Regional Administration and Local Government  
PSW- Para Social Worker  
PWD- Person with Disability  
REPOA- Research and Poverty Analysis  
SPSS- Statistical Package for Social Sciences  
SSWO- Senior Social Welfare Office  
SW- Social Worker  
SWO- Social Welfare Officer  
SWW- Social Welfare Workforce  
THRP- Tanzania Human Resource Capacity Project  
TASWA- Tanzania Social Workers Association  
TESWEP- Tanzania Emerging Social Work Education Program  
TzPPA- Tanzania Participatory Poverty Analysis  
UNICEF- United National Children's Fund  
WHO- World Health Organization.

## **DEFINITIONS OF COMMON TERMS USED IN THIS REPORT**

### **1. Para – Social Worker. (PSW)**

- A volunteer who has been trained to assist in the delivery of foundational social welfare services at community level.
- He/she offers psycho-social support and primarily refers clients to needed services within the community.

### **2. Social Worker**

The term social worker has been defined by the American National Association of Social Workers (NASW) as graduates of school of social work (with either bachelor's or master degrees) who use their knowledge and skills to provide social services for clients (individuals, families, groups, communities, organizations, or society in general). Social workers help people to increase resources between individual and between people and their environment, make organizations responsible to people and influence social policies (Zastrow, 2010). In other words social workers are “welfare workers” who are engaged in public assistance programs.

### **3. Social Welfare Workers/ Social Welfare Staff.**

In Tanzania, these include professional social workers, non – professional (PSWs) and all that work within Social Welfare Agencies/Institutions to offer support services e such as child care workers in child care institutions for the welfare and well-being of those they serve. Throughout this report we use the term social welfare workers as social worker is limited to those with professional training only.

### **4. Social Welfare Service.**

- Social Welfare Services are integrated services within facilities and programme (including social security) that promote social development, social justice and social functioning of people.
- Social welfare services are society's efforts to meet human needs. They are developed to help people function more satisfactory in their interaction with others and thus lead more fulfilling lives. They are designed to help and improve the wellbeing of individuals' families groups and communities and create a caring just society which respects human rights.

**5. Headquarters refer to office of executive of the Agency.**

Department of Social Welfare Headquarters for example is the office where the Commissioner for Social Welfare is stationed- this is in Dar as Salaam. The Department of Social Welfare on the other hand may be taken to refer to any of the offices of the Department anywhere in the country.

**6. Central Government:**

In this report references to 'central government' mean the executive branch of the National government, other branches being the Judiciary and Parliament. It is the highest authority in the country that oversees all socio, economic, and political concerns of the Country. In Tanzania the Chief Executive is the President.

**7. Local Government Authority (LGA)**

Refers to a part of the government of a country operating on a local level, functioning through a representative organ, known as the Council, established by law to exercise specific powers within a defined area of jurisdiction. The structure of LGA in Tanzania is as follows, starting on the lowest level of administration:

Hamlet – Village – Ward – District, Town, Municipal. City Council.

**8. Job description :** A document that states the job title, describes the responsibilities of the position, the direct supervisory relationship with other staff, and the skills and qualifications requires for the position

## EXECUTIVE SUMMARY

Socio economic and political changes in Tanzania since the late 1970s and more particularly in the 1980s have set in motion new and complex social problems and challenges affecting both urban and rural populations. These include high levels of poverty, breakdown of family relationships, poor health, rising rate of crime, alcohol and drug abuse and problems related to HIV/AIDS... In the last decade, Tanzania has enacted numerous policies and guidelines to respond to these challenges. These policies reflect Tanzania's commitments to protect its most vulnerable populations. They also commit Tanzania to a range of social services that can only be met with a professional highly-skilled social welfare workforce. Social welfare (SW) services fall under the supervision and guidance of the Department of Social Welfare (DSW) of the Ministry of Health and Social Welfare (MOHSW). Many institutions provide social welfare services including hospitals, prisons, schools, training institutions, faith based organizations, children's homes and select non-governmental organizations (NGOs) among others.

It is in this context that the MOHSW has determined the need to strengthen the social welfare workforce within the framework of the National Human Resources for Health Strategic Plan 2008—2013. It is apparent that an effective implementation of national policy and legislation on vulnerability and social protection requires for a strong and efficient social welfare workforce. Not only should there be enough institutional capacity for their training and recruitment but also a regular review of their deployment in the national labour force to assess the existing strength in the context of emerging service needs. Currently the DSW does not have the comprehensive information necessary, including the quantitative data, to make informed human resource decisions about the national social welfare workforce. It identified the need to conduct a thorough mapping of the available social welfare staff; their assigned roles and existing skills vis-a-vis the needs of priority vulnerable populations including the elderly, children and the disabled. Such an assessment, or situational analysis, was essential prior to embarking on developing a national workforce strategy.

The social welfare workforce assessment was undertaken in order to establish the existing situation and composition of the social welfare workforce within Tanzania, including a review of the policy and legal environment which give mandate and legitimacy to its work. Specifically the assessment has

sought to gather demographic information of social welfare workers currently working in Tanzania, document the social welfare services being provided by social welfare institutions/agencies, and provide a profile of social welfare workers, their expected roles and activities. The assessment also explored existing skill level and knowledge among social welfare workers, their work environment, performance bottlenecks, job satisfaction and professional career aspirations.

It is anticipated that the assessment findings will (1) generate data and information to be used by stakeholders in planning and budgeting for social welfare human resources, (2) inform public sector social service institutions of the existing opportunities and challenges towards meeting their respective commitments regarding the social welfare services delivery system, and (3).guide the Department of Social Welfare in determining the nature and content of a national Social Welfare Workforce Strategy.

The assessment methodology included a purposive sampling in four regions, Dar es Salaam, Kilimanjaro, Mwanza and Lindi. Data was collected through two questionnaires: one questionnaire for stakeholder institutions which generated information on social welfare services provided, the clientele system, and the distribution, composition, qualifications, location and work environment of social welfare workers; the second questionnaire focused on individual social welfare workers and was designed to collect information on the perceptions of individual social welfare workers of their qualifications, work-settings, professional competence, work-load, career aspirations and job satisfaction and/or frustrations. It has also revealed the dynamics of personnel management and how these might impact positively or otherwise in the efficient administration of social welfare services to various target groups. Through focus group discussions information was generated to complement and validate responses from the structured questions.

Literature review on relevant policy and legislation points to the existence in Tanzania of a comprehensive legal and policy framework for an effective social welfare service delivery system, judging from the scope and coverage of such literature. The framework demonstrates to a large extent the commitment and political will of the government to address vulnerability issues in accordance with national laws and international commitments. The assessment reveals however, that there is concern over limited evidence on the implementation and application of the laws, policies in

question. There is general lack of understanding and awareness among social welfare workers, of the content of such laws and policies. This is occasioned, primarily by to the inadequate dissemination of the documents and inadequate capacity building of the workforce around policies and legislation.

The overall objective of the assessment was to map the current state of Tanzania's social welfare workforce in Tanzania and establish its current situation and composition, including the policy and legal environment which govern mandate and legitimacy. The assessment would provide the evidence, quantitative and qualitative, by which government leaders and other stakeholders can make informed and strategic decisions.

As its specific objectives the assessment sought to provide demographic information of social welfare workers currently working in Tanzania and to document the common social welfare services provided by social welfare institutions /agencies at national and district levels, type of clientele served accessibility, profiles as he expected as well as expected roles of social welfare officers. Through interviews and documentary evidence, the assessment intended also to find out professional skills and knowledge possessed by social welfare officer, their perception of work environment and performance bottlenecks.

Findings of the assessment corresponding to the aforementioned objectives include the establishment that LGAs are emerging as the major employer of social welfare workers in the public sector in the country and that there is need to streamline the roles and functions of social welfare workers and community development workers particularly at that level. The need for the DSW to disseminate relevant policies among the staff has come up on account of the fact that lack of knowledge of such legislation as expressed by social welfare officers in the target regions undermines efficiency and effectiveness in the delivery of social welfare services.

Findings have shown also the existence of a general shortage of staff for the tasks being provided by social welfare workers both in the LGAs and in the regional social welfare offices and the need for further professional training in social work to enhance the technical capacity of the existing staff, on the other. There are however, ongoing initiatives supported by stakeholders to build national capacity to meet the manpower needs of the social welfare workforce.

Staff morale among social welfare workers is generally low, while the quality of social welfare services is poor. The report recommends measures to respond to the challenges, including undertaking capacity building targeting social workers to enhance their capacity.

## INTRODUCTION

### 1.0 Background and Context of the Assessment of the Social Welfare Workforce in Tanzania

The Ministry of Health and Social Welfare has determined the need to strengthen the social welfare workforce within the framework of the National Human Resources for Health Strategic Plan 2008-2013 with overall objective of enabling the social welfare system to respond effectively to the well-being and welfare of children orphaned and made vulnerable by disease, malnutrition, inadequate care or HIV/ AIDS., as well as people with disabilities and the elderly.

Both within and outside family environments a high number of Tanzanian children suffer abuse and exploitation, including abandonment, physical abuse corporal punishment, sexual and gender-based violence. The true, full extent is not known (Childhood Poverty in Tanzania: Deprivations and Disparities in Child Well-being: A Joint Report by REPOA, NBS and UNICEF 2009). The responsibility of the Department of Social Welfare of ensuring the enhancement of the provision of comprehensive, accessible services is, highlighted in the Health Strategic Plan 2008 – 2013 (Ministry of Health and Social Welfare, January 2008) According to the Plan, a commitment has been made by the Ministry, to develop and implement a Social Welfare Workforce Strategy under the auspices of the Multi – Sectoral National Prevention Plan on violence against children.

The major organizational forms involved in the supply of social welfare services are the social agencies and the social work profession. Virtually all social welfare services are dispensed through social agencies, public and private, and virtually all “social workers” professional and non-professional (Para-social workers) operate through such agencies. Agencies are created to integrate specialties based on technical knowledge; professions are organized to claim and realize jurisdictions based on technical knowledge. (Industrial society and Social Welfare P. 231.)

A broad policy framework for the provision of social welfare services is the National Strategy for Growth and Reduction of Poverty (NSGRP II), Cluster II of which focuses on improving the quality of social services and reaching the majority of the poor and vulnerable groups. The outcomes identified under the cluster include quality of life and social wellbeing for enhancing capabilities, with particular focus on the poorest, people with disabilities, and other vulnerable groups. Vulnerability has been defined as a process in which individuals, households and communities



are in the risk of being impoverished and become even poorer, and that it requires a critical attention and should be adequately examined and addressed in policy development (TzPPA 2004)

Effective implementation of national policy and legislation on vulnerability and social protection requires a strong and efficient social welfare workforce. Tanzania needs the institutional capacity for producing social workers, recruiting and deploying them as well as undertaking a regular review of the deployment in the context of emerging service needs.

The nature and scope of training social workers is captured under the National Social Welfare Training Institute Act, CAP 110 and R.E 2002 which mandates the Board of Governors of the Institute to ... "provide facilities for study of and training in the principles, procedures and techniques of community development social welfare and multifunctional social work practice."

The DSW's Strategic Action Plan 2007- 2011 indicates that it will implement plans for staff development to equip them with required skills to perform their functions effectively. The plan further states that the DSW will foster and create an environment that encourages high quality recruitment, retention and development of staff to improve the performance of social welfare activities.

Apart from concerns over skills and capacity of the social welfare workforce the DSW Capacity Assessment Report (DSW-UNICEF 2008) mentions the challenge of the existing gap in the co-ordination of social welfare services at the sub district level, caused by overwhelming shortage of social welfare officers in the districts hampering effective implementation of social welfare programmes in the districts and further down to the communities.

The acute shortage of social welfare workers is attributed to several factors, including the decentralization by devolution policy which in the context of the local government reform programme, requires each local authority to take up the responsibility of overseeing the provision of social welfare services. LGAs are therefore employing social welfare workers in the light of this requirement. The DSW has identified the need to conduct a thorough mapping of the available social welfare staff, their assigned roles and existing skills vis-à-vis the needs of priority vulnerable populations including the elderly, children and people with disabilities, as an essential preliminary step towards the development of a national workforce strategy. To that end the DSW has charged the Social Welfare Workforce Subcommittee to provide the technical oversight and guidance for this assessment.

## **1.1 Objectives of the Assessment**

**1.2 General Objective:** The overall objective of the assessment is to map the current state of Tanzania's social welfare workforce. It will establish the existing situation and composition of the social welfare workforce in Tanzania, including the policy and legal environment which give mandate and legitimacy to their work and provide the evidence, quantitative and qualitative, by which government leaders and other stakeholders can make informed and strategic decisions.

## **1.3 Specific Objectives**

**1.3.1** To provide demographic information of social welfare workers currently working in Tanzania.

**1.3.2** To document the common social welfare services provided by social welfare institutions /agencies at national and district levels, the type of clientele they serve, how such services are accessed as well as the profile of social welfare officers delivering such services including their expected roles and activities.

**1.3.3** To find through interviews and documentary evidence, the levels of social work professional skills and knowledge social welfare officers in the public sector at all levels of government possess, their perception of work environment, performance bottlenecks, job satisfactions and professional career aspirations.

## **2.0 Policy and Legislative Environment.**

### **2.1 Introduction**

An initial literature review focused on identifying the national commitments to provide social services, the regulatory and policy context in which social welfare workers operate, and the extent to which the legal and policy environment clearly defines the roles, responsibilities, and expectations of the workforce. A review of the literature also aimed at gaining a glimpse of both the legitimacy and justification for the specific services and target groups to be served by social welfare workers.

Furthermore, the scope of the mandate and responsibilities of social welfare workers, and by implication the requisite tools, skills, knowledge and facilities associated with such a mandate could only be established through a literature review which has made possible the identification of policy gaps which could limit effectiveness and efficiency in the delivery of social welfare services.

In this regard, the review of literature has focused on documentation on specific national policies, laws, as well as associated programmes and plans which touch on the functions and tasks of social welfare workers. They constitute the national responses to support vulnerable populations and provide guidance and directions on the needs of different vulnerable groups by different actors including social workers.

## **2.2 Overarching national policies.**

**2.2.1** The main report of the Tanzania Participatory Poverty Assessment (TzPPA) titled Vulnerability and Resilience to Poverty in Tanzania (2004) acknowledges that people are exposed to impoverishing forces which arise from social, economic and political processes, and that individuals, households and communities face market risks, health risks and environmental risks. They also become susceptible to external shocks and changes. The problems of HIV/AIDS, orphan-hood, climate change, disability and ageing, are a few of such cases. The report defines vulnerability as a process in which individuals, households and communities are in the risk of being impoverished and become even poorer, and that it requires a critical attention and should be adequately examined and addressed in policy discourse.

**2.2.2** Cluster II of the National Strategy for Growth and Reduction of Poverty (NSGRP II) focuses on improving the quality of social services and reach the majority of the poor and vulnerable groups. The broad outcomes identified under the cluster include quality of life and social wellbeing for enhancing capabilities, with particular focus on the poorest, people with disabilities, and other vulnerable groups. The Cluster identifies the main objective of social protection as the prevention of unacceptable levels of socioeconomic insecurity and deprivation. It includes a strategy which recognizes that interventions geared to prevent a descent into poverty differ from those intended to assist categories of people who, because of age, disability, stigma or other factors, may be excluded from services or otherwise unable to sustain themselves.

**2.2.3** The National Child Development Policy (2008) The policy places special emphasis on a child's right to nutrition, health, shelter, education, safety and the right not to be discriminated against. The policy stipulates the roles and responsibilities of key stakeholders for children, including community development workers and social workers, and aims to provide an enabling environment for effective implementation of various programmes for child protection.

- 2.2.4** The National Health Policy (2007): The Policy advocates, among other things for (1) early identification and intervention for children with disabilities (2) the provision of assistive devices to persons with disabilities, (3) elimination of negative attitudes and age discrimination and (4) protection of older persons.
- 2.2.5** The National Multi-sectoral Strategic Framework on HIV/AIDS (2007 -2012) The NMSF is intended to facilitate the implementation of the HIV and AIDS Control Act of 2007. Its goals include the improvement of the quality of life of PLHIV and those affected by HIV/AIDS, including orphans and other vulnerable children
- 2.2.6** The National Costed Plan of Action for Most Vulnerable Children: The programme is under the auspices of the Department of Social Welfare focuses on providing support for all children who are considered to be most vulnerable regardless of the cause of vulnerability, in order to avoid stigma associated with the identification of MVC with HIV/AIDS. The programme focuses on strengthening community-based care and assistance mechanisms including the establishment of MVC committees at ward and village levels. Community –based organizations support the provisions of essential services to both children and their care-givers. The professional and technical support of social welfare workers is essential for the successful implementation of the NCPA particularly at the district and community level.
- 2.2.7** The Anti-Trafficking in Persons Act ( 2008): The Act defines traffickers in persons as anyone who recruits, transports, confines, provides or receives a person by any means including under the pretext of domestic or overseas employment, training or apprenticeship, for purposes of prostitution, pornography, sexual exploitation, forced labour, slavery, involuntary servitude or debt bondage. It provides for the social rehabilitation of rescued victims of trafficking to be carried out by social welfare officers for the purpose of re-instating the victims back into normal way of life, and may include provision of legal assistance and material assistance, psychological, medical and professional rehabilitation, employment and dwelling place.

According to the DSW capacity assessment report, in September 2008, through circular no CHA.215/355/01/87, the Principal Secretary, PMO-RALG informed all Directors in District Councils, City Councils and Municipal Councils to start employing at least 4 Social Welfare

Officers to work in each of the three units in the Social Welfare Department structure, namely the Family, Child Welfare and Early Childhood Development, Juvenile Justice and Aging and Disability effective 2009/10 financial year. In the same circular, the Government directed that Social Welfare Officers located in Regional Secretariats be transferred to local governments. The objective of the process is to bring social welfare service closer to communities in keeping with the Decentralization by Devolution

### **3.0 Policies, Guidelines and Legislations specific to vulnerable groups**

- 3.1** The Law of the Child Act No.21 of 2009, which provides for the protection and realization of the Rights of the Child. The law mandates and empowers the Minister responsible for Social Welfare, the Commissioner for Social Welfare and Social Welfare Officers to carry out activities for the protection and realization of such rights. Such activities provided for in the Law include foster care and adoption, care and parentage, custody and maintenance, and legal safeguards.
- 3.2** The National Policy on Disability (2004) provides guidelines and sets parameters for service delivery to people with disabilities. It recognizes the importance of providing a conducive environment for people with disabilities to engage in productive work and the utilization of available resources for improved service delivery. Furthermore, the policy identifies key social, cultural and economic areas of focus for the realization of its objectives. It delineates stakeholders' responsibilities to the central government, local authorities, families, communities and non-governmental organizations.
- 3.3** The Disability Act of 2010 provides for the realization of the Rights of People with Disabilities. It empowers the minister responsible for Social Welfare, the Commissioner for Social Welfare and Social Welfare Officers to carry out activities for the realization of the rights of people with disabilities.
- 3.4** The Tanzania 2008 Disability Survey Report: The objective of the survey was to determine the prevalence of disability in the country and the living conditions among people with activity limitations. Data generated by the survey includes essential characteristics of the household population and profiles and experiences of children and adults with disabilities. The survey results provide a useful tool for the planning and provision of services to people with disabilities.

- 3.5** The National Ageing Policy (2003) has been formulated to guide the provision of services to older persons and encourage their participation in the daily life of their communities. The policy identifies areas of focus for service delivery provision as (1) health services (2) income generation and (3) support to families.
- 3.6** The National Guidelines for Provision and Management of Foster care and Adoption Services (2006) The Guidelines have been developed with a view to provide a hands –on information to individuals and families on procedures to be followed by prospective foster/adoptive parents, and requirements which precede applications for the same. The Guidelines are also a service and supervisory tool for social workers who provide foster care and adoption services
- 3.7** The National Guidelines for Improving the Quality of Care, Support and Protection for Most Vulnerable Children (2009.) The Guidelines have been developed so as to harmonize and standardize service delivery. They provide social workers with a range of actions and options to take, based on the individual needs of the child and the desired quality levels. The Guidelines can be used as a tool for both direct service delivery and the supervision of service providers
- 3.8** The National Guidelines for the Establishment and Management of Children' Homes (2006) The Guidelines could be summarized as licensure and operational standards of care. They are intended for use by prospective and current operators of children's homes. They are also intended for use by social workers in children's homes or those who assist operators of children's homes.
- 3.9** The National Action Plan for Elimination of Worst Forms of Child Labour (2009)  
The plan highlights the worst forms of child labour in the context of the NSGRP and the target for its elimination as one of the important measures to tackle poverty. It categorizes children in worst forms of child labour as a category of MVC and cites the role of Para-Social Workers in performing a variety of functions in response to child labour, including outreach and identification, assessment of needs, provision of support and referral of child laborers to needed services.

#### **4.0 Policy and legislation on development and capacity building of Social Workers**

- 4.1** The National Social Welfare Training Institute Act, CAP 110 and R.E 2002. The legislation, among other things mandates the Board of Governors of the Institute to .... Provide facilities for study of and training in the principles, procedures and techniques of community development social welfare and related subjects; conduct training programmes leading to professional qualifications in generic and multifunctional social work practice. The text of the law limits the Institute to the provision of generic training to social workers who are otherwise destined to attend to complex and specific client groups such as children in children's homes
- 4.2** The Human Resource for Health Strategic Plan 2008 - 2008 aims at guiding the health sector in proper planning, development, management and effective utilization of human resource. It intends to minimize the problem of human resource shortage, and increasing the capacity of health and social welfare workers at all levels through establishment of effective management systems. It notes that the extreme shortage on the social welfare staff has been caused by among other factors the decentralization policy which required Social Welfare Services to be rolled out to district and ward levels
- 4.3** The World Health Organization (WHO) on the other hand, identifies several human resource management components that are essential for improving HRM functions which include (1) HRM capacity which is comprised of budget, staff, and human resource planning, implying that there should be qualified staff charged with HRM responsibility, along with a HRM budget and human resource planning, (2) Personnel policy and practice, which provide an essential framework for defining the terms and conditions of work and which need to be in place before effective performance management and supervision systems can be implemented, (3) Performance management under which performance and management systems define how people will interact with each other and how the work that they do will support the goals of the institution or organization, (4) Training, which is essential to an effective HRM system, but most effective when managed and integrated into human resource planning, HRM policy and performance management and (5) Data, implying that HR M data supports all the other components, and that all organizations require some means of gathering data about employee since employment needs can only be projected when employee data is available.( Tools for Planning and Developing Human Resources for HIV/AIDS and other Health Services, 1992)

It notes however that in many countries, human resource management systems are fragmented and that politicization and fragmentation of the recruitment, deployment and promotion processes often prevent a given workforce from achieving its potential. This often is the case in situations where the human resource planning and recruitment/hiring functions are vested in two different authorities.

The MoHSW/UNICEF report on the capacity assessment of DSW (2009) notes that the recruitment process in the department, like it is the case with many other government offices, is coordinated by the President's Office – Public Service Management, meaning that the Public Service Management has central control over budgeting and coordinating the hiring process for the public service. This arrangement has however been a drawback towards the department's efforts to address the manning levels given the budgetary constraints facing the Public Service management.

It may be concluded from the aforementioned literature, that there exists in Tanzania a legal and policy framework that is comprehensive enough as a basis for a well functioning and vibrant social welfare service delivery system, at least in terms of both the scope and coverage. Such framework demonstrates to a large extent the commitment and political will of the government to address vulnerability issues in keeping with national laws and international commitments. The assessment has noted, however, that there is very limited documentation on the implementation and application of laws, policies and regulations in question, while on the other hand there is general lack of understanding and awareness among social welfare workers, of the content of such laws and policies. This is occasioned, primarily by to the non-dissemination of the documents and inadequate capacity building of the workforce around policies and legislation.

## **5.0 Conceptual Framework of Human Resources Management (HRM) for Social Welfare Services in Tanzania**

HRM has been defined as the management of an institution's workforce. It is responsible for the attraction, selection, training, and assessment and rewarding of employees, while also overseeing organizational leadership and culture and ensuring compliance with employment and labour laws (Towers David, "Human Resources Management Essays 2007). Human Resource policies



provide an organization with a mechanism to manage risk by staying up to date with current trends in employment standards and legislation.

Human resource management perspectives of the social welfare workforce and attendant challenges might be better conceptualized by a looking at some of its basic principles which have featured in and/or are relevant to the assessment of the workforce. These include:

- a)** Human resources policies. These ought to be framed in a manner that an institution's vision and the human resource helping it to achieve it or work towards it are not deviated from their main objective. HR policies allow an organization to be clear with employees on the nature of the institution, what they should expect from the organization, what the organization expects of them, how policies and procedures work, what is acceptable and unacceptable behavior and the consequences of unacceptable behavior
  
- b)** Human resource management components which are essential for improving HRM functions. These include the human resources capacity which is constituted of a budget, staff as well as human resource planning, personnel policy and practice which provide an essential framework for defining the terms and conditions of work and which need to be in place before effective performance management and supervision systems can be implemented, performance and management systems which define how people will interact with each other and how the work that they do will support the goals of the institution or organization and training which is essential to an effective HRM system, but most effective when managed and integrated into human resource planning.
  
- c)** The term training refers to the acquisition of knowledge, skills, and competencies as a result of the teaching of vocational or practical skills and knowledge that relate to specific useful competencies. Training has specific goals of improving one's capability, capacity, and performance. Diane Arthur (1995). "Training and Development". *Managing Human Resources in Small & Mid-Sized organizations*
  
- d)** Staff retention involves the institution's ability to retain employees. In order to retain employees and reduce turnover managers must meet the goals of employees without losing sight of the organization's goals, thereby creating a "win-win" situation. High turnover rates of skilled professionals can pose as a risk to the business or organization, due to the human

capital (such as skills, training, and knowledge) lost. Notably, given the natural specialization of skilled professionals, these employees are likely to be re-employed within the same industry by a competitor. Therefore, turnover of these individuals incurs both replacement costs to the organization, as well as resulting in a competitive disadvantage to the business.

- e) Staff supervision is among the human resource management issues which feature in the assessment of the social welfare workforce. Supervision according to HRM literature is the basic tool through which staff are managed and supported. Supervision provides both participants with a regular opportunity to obtain feedback, share concerns, review progress, identify learning needs and plan. The main aims of supervision are for all staff members to: (1) be clear about their responsibilities and roles, (2) enable work to be planned and progress monitored, (3) ensure that service objectives are being met Receive support in carrying out their work Supervision however must be linked to staff development and appraisal / performance management processes if the aim of a competent and confident team is to be achieved.

## **6.0 Methodology for Field Work**

### **6.1 Scope and coverage**

The team conducted a purposive sampling of four regions namely: Dar es Salaam, Mwanza, Kilimanjaro and Lindi. Dar es Salaam region was selected on the assumption that being the largest city in the country with a population of 3.5 million (national census of 2002), and headquarters of almost all government ministries and social welfare service institutions has a heavy presence of social welfare workers. The three Municipalities of the Region (Ilala , Kinondoni and Temeke ) have been covered in the assessment.

Kilimanjaro region was identified and included in the sample due to the fact that it has the only government training institution Kisangara which trains social welfare assistants as well as para – social workers. The institution also runs courses on specialized service areas for example early childhood care. Kilimanjaro also has a large concentration of direct service centers where services are provided to a group of clients such as children’s homes. The assessment covered Moshi Municipality and the districts of Rombo, Same and Mwanga where Kisangara Social Welfare Training Institution is located.

Mwanza region was included in the sample on the basis of its comparatively higher population, both as a region and a city, (with 2.8 million people according to the 2002 national census), hence the prospect for a big concentration of social welfare staff both at central and local government levels. Lindi region was included in the sample as "control" region given the fact that it has features which significantly differentiate it from other regions. Lindi is comparatively peripheral region in terms of accessibility and is less urbanized. It has limited presence of social welfare services and institutions and therefore fewer social welfare workers. As such, the region provided the assessment with the opportunity for a comparative analysis of the situation of social welfare services and workers Vis a vis geographical locations and levels of urbanization of individual regions.

The sample population of the assessment was constituted by all social welfare workers based in the target regions, regardless of their level of seniority, duration of service or their respective employer organizations. As shown on Table 1, the assessment team visited seventeen (17) public institutions and nine (9) NGOs in Dar es salaam region and carried out seventy two (72) interviews, while in Mwanza region a total of thirty four (34) interviews were conducted involving visits to seventeen (17) public institutions and nine (09) NGOs. Same number of public institutions (09 in each) were visited in Lindi and Kilimanjaro regions, where six (6) and eight (8) NGOs respectively were reached. . Numbers of institutions and interviews in the target regions confirms the fact that the incidence of concentration of social welfare service institutions does generally correspond with the level of urbanization and population size of individual regions. All together a hundred and fifty five interviews were conducted in the four target regions.

**TABLE 1: INSTITUTIONS VISITED AND NUMBER OF INTERVIEWS IN EACH REGION**

<b>Region/districts</b>	<b>Stakeholder institution</b>	<b>NGOs</b>	<b>Number of interviews</b>
Dar Es Salaam Region (Ilala, Kinondoni, Temeke Municipalities)	Institute of Social Work; Department of Social Welfare; Temeke Municipal Council ; Ilala Municipal Council;; Ilala Municipal Hospital;; Kinondoni Municipal Council; Muhimbili Hospital; Remand home; Kurasini Children’s Home; Mwananyamala hospital; Amana hospital Temeke hospital	KIWOHEDE;; Dogodogo Centre Missionaries of Charity WAMATA; Youth Counseling Rehab. Centre; Salvation Army PASADA; Al-Furqaan	<b>72</b>
<b>Total</b>	17	09	
<b>Mwanza Region</b> (Mwanza city, Geita & Magu districts)	RAS; Mwanza City Council; Butimba Prison; Municipal Council;Municipal Hospital; Magu district council;; Geita district council; Bugando hospital.; Regional prisons officer Regional Social Welfare Officer; SekouToure hospital; Magu prison; Geita district social welfare office; Magu district social welfare office; Magu district hospital Geita district hospital; Bukumbi home for the elderly	Starehe children’s home TUMAINI, KULEANA, Busega, Bethany children’s home Baylor Institute	<b>34</b>
<b>Total</b>	12	08	
<b>Lindi Region</b> (Lindi Municipality Nachingwea, & Kilwa districts)	RAS; Lindi Municipal Council; Nachingwea district council; Kilwa district council; Sokoine regional hospital; Regional prisons office; Lindi district Council; Nachingwea district hospital; Kilwa district hospital	LIWOPAC Huruma Women Foundation NAWODA; Pemwa; Shikwauki	<b>25</b>
<b>Total</b>	09	06	
<b>Kilimanjaro Region</b> (Moshi Municipality, Rombo and Same districts)	RAS; Moshi Municipality; Rombo district council; Same district council; Prisons Department; KCMC Hospital Mawenzi hospital Kisangara Training centre Mkombozi Centre Njoro home for elderly	Red Cross; KIWAKUKI Kinshai Home; Amani Centre Kuyeko Legal Aid & Counseling Rainbow Centre; Save the children	<b>24</b>
<b>Total</b>	9	08	<b>155</b>

## 6.2 Field Instruments

The research team used a variety of methods to collect both qualitative and quantitative data from the field. The team developed questionnaires for stakeholder instructions as well as for individual

social welfare workers. An interview guide, observation guide and a set of questions for focus group discussion were also developed.

These tools were reviewed and subsequently approved by the SWW Sub- committee.

### **6.3 Questionnaire for Stakeholder Institutions**

This instrument was used to collect information from organizations and agencies which provide social welfare services to various vulnerable target groups such as the elderly, orphaned children, people with disabilities, abused and neglected children, children in conflict with the law, people living with HIV/AIDS and victims of gender violence. The team met with 78 organizations of which 47 are in the public sector while 31 are NGOs.. A list of all the organizations visited together with the number of interviews conducted in each region is as shown in table 1. . It was also used to collect information from institutions which provide correctional rehabilitation and training services such as prisons, hospitals and training centers. Non- governmental organizations including faith based agencies were also included in this category.

The questionnaire for stakeholder institutions generated information regarding the type of social welfare services provided by social welfare institutions and agencies at national and district levels, the type of clients served and how such services are assessed. Such information indicated also the current staff training distribution and whether it meets current needs.

The questionnaire also established the situation of new social workers entering the labour market, their qualifications, their work environment, staff development and job satisfaction.

### **6.4 Questionnaire for individual Social welfare workers.**

The questionnaire was used to gather information on the perceptions of individual social welfare workers of their professional qualifications, work settings, professional competence, work load, career aspirations and job satisfaction and or frustration It also reveals the dynamics of personnel management and labour administration in the social welfare sector and how these might impact positively or otherwise in the efficient administration of social welfare services to various target groups.

### **6.5 The Interview Guide.**

The interview guide was used during the course of field interviews to ensure that questions posed to the respondents including supplementary and probing questions addressed key areas of the assessment.

## **6.6 The Observation Guide.**

This guide was used to generate supplementary information on the work environment or the work setting in which social welfare workers operate. In this regard the likes of office space, location and accessibility, working tools and utilities are worth observing and taken note of as they have implications on the levels of efficiency, effectiveness, and morale and job satisfaction for individual social workers. They might also be a pointer to the level of recognition and status accorded to social welfare workers by the authorities concerned and indeed by the general public.

## **6.7 Focus Group Discussions (FGDs).**

Focus Group Discussions (FGDs) is yet another method the research team used to gather qualitative information from groups of people who are familiar with the subject of study and are well placed to have adequate knowledge and understanding of the issues, processes or operations related to the provision of a particular social welfare service. The purpose of FGD is primarily to validate responses from the structured questions and to supplement the qualitative information obtained through other methods. The consultants identified for FGD groups of individuals who were defined by their common relationship with the social welfare service system either as service recipients or as administrators of such services. Such groups included social work/ social welfare students, the elderly and NGO staff. FGD did not include respondents already covered by the structured interview.

FGDs were guided by a set of pre-determined set of questions although often new questions arose as probes in the course of discussions. There were a total of 7 FGDs, including 2 with social work students, one with social work tutors and 4 with elderly people in long-term care facilities. The discussions were facilitated and guided by the consultants.

Analysis began immediately after the discussions. Facilitators (consultants) and note takers (data collectors) compared notes and key issues were briefly discussed and noted. Tapes were listened to and later transcribed verbatim to capture emerging issues and pattern as they relate to the objectives of FGD. Key words, phrases and sentences that typify the theme were noted. Responses were assembled according to the guiding question asked. Observation notes were compared with FGD data to strike a desired balance.

Conclusions and recommendations from FGDs have been integrated in this final report of the assessment.

## **6.8 Pre-testing tools**

The questionnaires, interview guide, observation guide and FGD set of questions were translated into Kiswahili for purposes of easy understanding and conceptualization by the respondents. Data collectors, three from each region and four in Dar es Salaam, were oriented to the assessment and its objectives as well as overall approach and principles of data collection. The orientation focused on correct use of questionnaires, ways to strengthen the quality of the information, and included a role play on the administration of the questionnaires; interview and observation guides and how to conduct focus group discussions. The team pre-tested the tools in the Temeke , Ilala and Kinondoni districts of Dar es Salaam to determine their relevance and reliability. After the pre testing necessary adjustments to the tools were made.

## **7.0 Limitations and Mitigation**

The research team faced some challenges in the course of data collection. These challenges included the following.

### **7.1 Non – availability of some key respondents**

Some senior officials in the government at regional and district levels had busy schedules and priorities which made them unavailable for interviews. The majority of the heads of departments could not be interviewed on the first visit despite confirmed appointments. As a mitigation, the research team requested for a second appointment in terms of time convenient to the respondents. When an alternative time was not feasible the team asked for a senior representative to do the interview.

### **7.2 Time- constraint :**

Some of the respondents had little time available for interviews due to other commitments. As a way out, the team conveyed to the respondents a concern that they were aware that they had other commitments and the interviews would not take too much of their time. The team was also prepared for a second visit.

### 7.3 Lack of interest

Some respondents showed little or no interest at all in participating in the interviews. They considered the interviews as a disturbance or waste of time. The team explained clearly at the beginning of the interviews why the information requested was important to the assessment and that it was for public good.

### 7.4 Payments for interviews

A few of the prospective respondents asked to be paid before they could participate in the interviews. As a mitigation, the team explained politely that there were no provisions for such payments

### 7.5 Lack of data on enrolment trends at ISW

The assessment did not access any enrolment projections for the training of new social workers, although some of the lecturers interviewed mentioned that there was increasing demand for registration. The team relied on information on the number of students graduating in the different courses over the last three academic years as an indicator for trends in registration

## 8.0 Findings of the Assessment

### 8.1 Demographic information on social welfare workers currently working in Tanzania. )

.At the national level, the total number of social welfare workers excluding those employed by NGOs is estimated to be 437, comprised of those placed at Regional Secretariat offices (23), employees of the central government (59) LGA employees (215) and central government employees working in LGAs (60). When staff at headquarters/head office (31) and those in institutions (49) is added, the total workforce is 437 as shown on Table 2a. It is evident from the figures that the majority of social welfare workers are employed by the local government authorities and that there exists a demand which has necessitated the secondment of 60 staff of the central government to the LGAs. Countrywide labour force is shown on Annex 2.

**TABLE 2A: DEPLOYMENT OF SOCIAL WORKERS IN THE PUBLIC SECTOR.**

SW Workers Regional Secretariats	23
SW Workers in central government	59
SW Workers in LGAs	215
SW Workers (central govt) in LGAs	60



SW Workers at HQTs	31
SW Workers in Institutions	49
Total	437

Source: Social Welfare Department 2012.

There exists also in the DSW a significant shortage of social welfare workers, as evidenced by the projected staff requirements provided by the department. (Table 2B)

**TABLE 2B: DSW PROJECTED STAFF REQUIREMENTS.**

NO	UNIT	PSWO	SSWO	SWO	WA	TOTAL
1	DSW Head Office	6	18	5	-	29
2	Long Term Care Facilities	-	14	23	-	37
3	Vocational Training Centers for PWDS	3	7	7	-	17
4	Children's Home	1	2	-	-	3
5	Remand Homes -	-	5	19	12	36
6	Approved School	-	1	8	4	13
7	Social Welfare Staff Training Centers	1	5	7	-	13
8	Social Welfare District Offices (133 Districts )	133	133	266	-	532
9	Social Welfare assistants, (2,687 wards)				2,687	2,687
	TOTAL	144	185	335	2,693	3,367

**Source: MOHSW (DSW), 2012.**

There exists also in the DSW a significant shortage of social welfare workers, as evidenced by the projected staff requirements provided by the department. As shown on Table 2b, twenty nine (29) additional professional staff of various levels including six (6) principal social welfare officers is needed. Individual units need varied numbers of additional staff with district social welfare offices countrywide requiring a total of 532 staff, most of whom would hold the position of social welfare officers. The biggest demand however is at the ward level, where 2,687 social welfare

assistants are needed in the same number of wards countrywide. The total requirement for additional social welfare workers is 3,367. DSW has not indicated the time-frame for the staff projection requirements.

#### **8.1.1 Interviewed Institutions employing social welfare workers.**

The number of social welfare workers deployed in the public sector in the target regions differs from one to another, as determined by presence of relevant social service institutions and also the number of districts which have already enlisted the cadre in their manpower recruitment and social service delivery system.

As expected, Dar es salaam region by virtue of its big population size and heavy presence of social welfare service –related institutions does have the highest number of social welfare workers interviewed (49%) among the four regions covered in the assessment, followed by Mwanza region (20%) which includes the Mwanza city with also a relatively high presence of social welfare institutions. Kilimanjaro and Lindi regions have a smaller number of social welfare workers, standing respectively at 18% and 13%. It can be deduced therefore that the demand for social welfare services is primarily a function of population growth and rate of urbanization and that local government authorities need to accommodate this reality especially in their long term planning.

#### **8.1.2 NGO Involvement in Social welfare Services Delivery.**

Data generated from the assessment suggests that there is a significant involvement of NGOs in the delivery of social welfare services in the country. Out of a total of the 78 intuitions visited 31 are NGOs, which is 39.7 % of all the institutions. The considerable presence of NGOs in the delivery of social welfare services is associated with their respective commitment to support the government in the delivery of social welfare services to vulnerable groups.

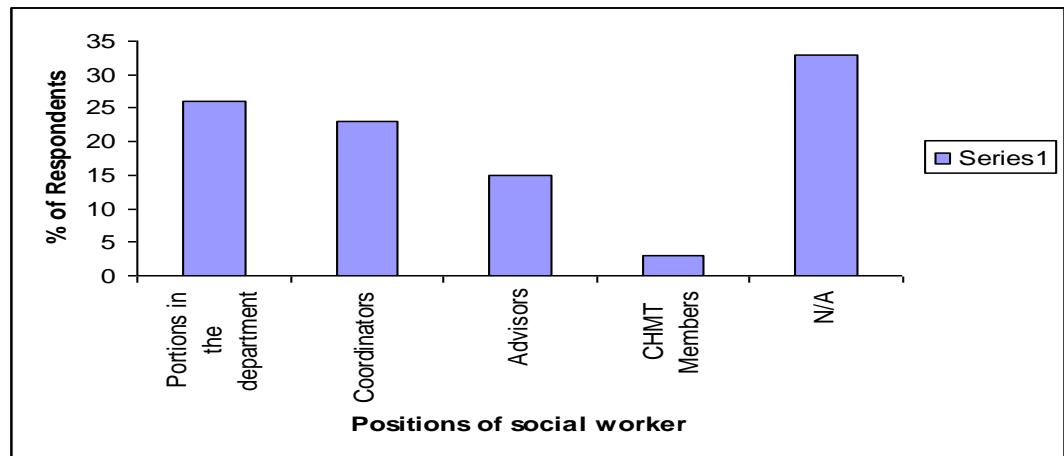
The assessment noted however that not all social welfare service centers employed professional social I workers for reasons which could not be established. Given the envisioned requirement by the proposed Social Workers Council that social welfare service providers should employ professional social workers, the number of social workers employed by NGOs is bound to increase. The DSW capacity assessment report (2009) notes that the onset of non-government organizations has increased the demand for social workers' skills in the labour

market, and that the competition offers comparatively high salaries and better working conditions which could cause a serious challenge to the DSW in case it does not design and create attractive work conditions.

### 8.1.3 Location of Social Welfare Workers within Institutional structures.

The assessment intended to figure out where in the structures of employing institutions social welfare workers were located, with a view to figure out the degree of their recognition and for that matter the value the concerned institutions attach to their services as a professional cadre. It was found, as shown on figure 1, that 26% of the 88 social welfare workers interviewed in the four regions worked at the department level which in many cases is a senior position. Others worked as co-ordinators (23%) and advisors (15%) both of which are titles which denote official recognition and are in fact management positions. It is worth noting however, that the assessment could not pinpoint the location of 33% of social welfare workers, in their respective structures.

**FIGURE 1: LOCATION OF SOCIAL WELFARE WORKERS IN INSTITUTIONAL STRUCTURES IN THE TARGET REGIONS**



Source: SWW Assessment Findings 2012

## 8.2 Social Welfare Services, accessibility, type of clientele, and expected roles of social welfare officers

### 8.2.1 Roles and responsibilities of Social Welfare officers

The roles and responsibilities of social welfare workers are intertwined with the services they provide to varied clientele. While social welfare workers perform similar professional social work functions in whichever sector they are employed, their actual day to day roles vary according to the mandates and service-focus of the individual institutions they work for. The assessment has identified the services provided by social welfare workers as listed in Table 3.

Another set of functions by social welfare workers include health related services, in particular the provision of services to people living with HIV/AIDS (home -based care; voluntary counseling and testing and community education on HIV/AIDS

The aforementioned responsibilities are elaborated in the schedules of the different cadres of social welfare officers which has been prepared by the social welfare department and in their specific job descriptions. The functions include but are not limited to those listed in Annex 3. It has been noted however that the functions are in many cases similar across the schedules, something which suggests that individual social welfare officers assigned in any of the schedules would have requisite professional knowledge.

### **8.2.2 Services provided by Social Welfare Officers**

The majority of social welfare workers are involved in providing individualized services in the context of family integration on the one hand, and networking among stakeholder or social partner institutions in the context of referral systems on the other. Affiliation and matrimonial cases including child maintenance as well as associated family conflicts fall under this category of services. The services are presented as a package of the main professional tasks performed by individual social welfare workers who were interviewed.

**TABLE 3: SERVICES PROVIDED BY SOCIAL WELFARE WORKERS**

	<b>Frequency 114</b>	<b>% of respondents</b>
Family integration and promotion of networking among stake-holders	23	22
Counseling and self identification	21	20
Healthcare education , counseling and research	12	11
Community-level counseling with focus on community problems	11	11
Economic empowerment of women groups ,education and mobilization and registration of NGOs	7	8
	7	7
Health education, HIV/Aids , psychosocial support	7	7
Mobilization for community development	5	5
Counseling and education	4	4
N/A	4	4
Food, accommodation, food, health care	2	2
training, family planning and health care services	2	2
Training and supervision	1	1
Counseling and follow-up on individual social problem cases	1	1
Attendance court proceedings of remand prisoners	1	1
Child Protection, Advocacy, Entrepreneurship training	1	1
Prepare prisoners' applications for parole, and provide counseling services	1	1
Follow-up on the service needs at the center	1	1
Mobilization on school enrolment.	1	1

Source SWW Assessment Findings 2012

Social welfare workers involved in community development work undertake activities including the economic empowerment of women groups, education and mobilization.

### **8.2.3 Designations of Social Welfare Workers.**

The assessment sought to find out the designation of individual social welfare workers in order to gain an understanding of their location within the employing organizations, their official identity and level of seniority and therefore the extent to which they are accorded recognition by employers. Designations or official titles influence the way in which individual workers are perceived by supervisors and also how they are seen to be in a position to contribute to or

influence decision making in the institution. Findings show that the majority of the respondents (31%) are social welfare officers while 16% are community development officers.

Respondents included principal social welfare officers (7%) and senior social welfare officers (8%) As shown on Table 4. Designations of social welfare workers vary with the nature of organizational structures of the employing institutions, so that some are designated as project officers/advisers, medical social workers or youth officers

**TABLE 4: DESIGNATIONS OF SOCIAL WELFARE WORKERS**

	<b>Frequency 107</b>	<b>% of respondents</b>
Social Welfare Officer	33	31
Community Development Officer	17	16
Senior Social Welfare Officer	8	8
Social Welfare Officer Grade 11	8	8
Social Welfare Officer Grade 1	7	7
Principle Social Welfare officer	7	7
Project Co-ordinator	4	4
Social Welfare Officer=Health Grade 1	4	4
Community Development Assistant	3	3
Medical Social Worker	2	2
Executive Director	2	2
Project Officer	2	2
Advisor	2	2
Youth Officer	1	1
Family liaison officer	1	1
Community Service Officer	1	1
District Community Dev. Officer (W)	1	1

**Source:** SWW Assessment Findings, 2012

### **8.3 Social Welfare Workers knowledge and skills, qualifications, recruitment and performance levels.**

#### **8.3.1 Production of new social workers.**

The production of social welfare workers in the country is closely associated with and relies to a large extent on courses offered by the Institute of Social Work. The Institute has been under pressure to meet the growing demand for social work training, as mentioned by the lecturers interviewed during the assessment. The assessment did not access any specific enrolment projections. . The only possible indication of increasing enrolment is that the number of students graduating has increased steadily over the 2008/2009 – 2010/2011 periods, as shown

on Table 5. There is however, an expected decline for 2011/12 from 730 graduates in 2010/2011 to 568 graduates in 2011/2012 for reasons which the assessment could not establish. As a complementary initiative to train more social welfare personnel at different Levels to address the existing shortage of social welfare workers in the short term, the Institute has developed a Para-Social Work curriculum and training programme in collaboration with IntraHealth International. The latter is currently supporting the rolling out of the programme, in four regions.. Furthermore the DSW has in collaboration with AIHA, will introduce the cadre of Social Welfare Assistants to reduce the gap at lower levels through one-year certificate training program to be introduced at Kisangara training centre during 2012.

**TABLE 5: PRODUCTION OF SOCIAL WORKERS AT VARIOUS LEVELS.**

2008/2009		2009/2010		2010/2011		2011/2012	
CSW	94	CSW	117	CSW	114	CSW	111
DSW	151	DSW	137	DS W	114	D SW	88
BSW	147	BSW	112	ODSW	116	ODSW	116
BSW	69	BSW	113	BSW	122	BSW	116
PDGSW	28	PDGSW	39	B SW	95	BSW	76
				BSW	102	BSW	46
				PGDSW	23	PGDSW	15
<b>Total</b>	<b>498</b>	<b>Total</b>	<b>578</b>	<b>Total</b>	<b>730</b>	<b>Total</b>	<b>568</b>

**Source:** Institute of Social Work 2012

### 8.3.2 Production capacity at the Institute of Social Work.

Interviews with students at the Institute have revealed that the capacity of the Social work department at the Institute of Social Work has improved in the areas of curriculum development and consultancy training, particularly in Para Social Work and Child Protection, but that the department needs additional teaching staff, particularly at the level of

#### **FGD with ISW students**

**Respondent N:** "the library is quite small; it does not meet the needs of the students. There are few books and also the librarian is not able to arrange books accordingly. So, it is difficult to seek for a book in the library."

MSc in Social Policy and Social Welfare as well as PhD holders in Social Work and Social Development.

They added that currently there were only eight (8) lecturers in the department, who are overwhelmed by the existing number of courses. The assessment did not access any projections of the Institute in terms of teaching staff requirements. Focus Group Discussions with students pointed to the inadequate teaching facilities as well as poor library services.

The assessment was informed during fieldwork that the Open University of Tanzania does also provide social work training at the level of Masters of Social Work degree (MSW), a demand driven program aimed at promoting the professional growth of social work in Tanzania. The degree is being offered since 2007 through evening and distance modes. The MSW is a one year program for students with social work background, and two years for students with no social work background. Candidates with no background on social work will have to undergo one year postgraduate Diploma in Social Work before being admitted in the MSW degree program.

### 8.3.3 Skills and Knowledge requirement for Social Welfare Officers' Work.

The assessment intended to establish the level of awareness among institutions, of the professional knowledge and skills which social welfare workers need to possess for the work they do, since such understanding does influence recruitment practices on the one hand and also the designation and tasks given to individual staff, along with the terms and conditions of work. Most institutions interviewed (51%) mentioned social work education as a key requirement, while 33% others mentioned education in the social sciences as being critical in social welfare work practice. This implies that the institutions have a fair understanding of the importance of social work profession. These responses are shown on Table 6.

**TABLE 6: SKILLS AND KNOWLEDGE REQUIRED FOR SOCIAL WELFARE OFFICERS' WORK.**

	Frequency 39	% of respondents
Education in social work	20	51
Education in social sciences	13	33
	2	5
Project write ups and facilitation	1	5
Education in social works and Knowledge on Health and preventive mechanism	2	3
Data Management System	1	3

**Source:** SWW Assessment Findings, 2012



### 8.3.4 Levels of education/training of social welfare workers.

Training of personnel is an important aspect in the provision of social welfare services. The right and relevant training as ascertained by the national accrediting institution provides personnel with the skill sets needed to appropriately attend to and handle different client needs. Available information (DSW, 2011) shows that most of the social welfare staff (36%) employed by MoHSW were trained at the Institute of Social work in Dar es Salaam. Their qualifications range from ordinary Diplomas to Advanced Diploma. A few of them have post graduate diplomas. Degree holders in social work were trained abroad while degree holders in other social welfare related areas (such as sociology) received their training in the country.

Professional qualifications of the personnel in the visited institutions show that 12 social welfare workers (36%) of the respondents have advanced diploma qualification in social work, while 10 social welfare workers (30)% have a Bachelor of Social Work qualification. Personnel with Masters Degree in social work were 4 (12%), ordinary diploma in Social Work holders 11 (12%) and Certificate in Social Work holders were 3(9% All these are these are basically social work qualifications.

Social workers of varied levels of education and training in the target regions were at the district, regional as well as national levels, which implies that necessary professional competencies are generally evenly spread across geographical and administrative boundaries, as shown on Table 7.

**TABLE 7: WORK STATIONS AND EDUCATION LEVELS OF SOCIAL WORKERS IN THE TARGET REGIONS**

	Levels of education	Frequency 33	% of respondents
District commissioner office	MSW	-	-
	BSW	6	13
	ADP	7	18
	DIP	3	8
	CERT	-	-
Regional Commissioner office	MSW	1	3
	BSW	1	3
	ADP	1	3
	DIP	1	3
	CERT	2	6
Head Quarters/head office	MSW	3	8

	BSW	2	6
	ADP	2	5
	DIP	-	-
	CERT	1	3
Hospital	MSW	-	-
	BSW	1	3
	ADP	2	6

**Source:** SWW Assessment Findings 2012

### 8.3.5 Scheme of Service and Job Descriptions

The scheme of service spells out educational qualifications and/or work experience requirements for entry to the various levels of three cadres of social workers which are childcare workers, social welfare assistants and social welfare officers. The most recent, (Social Welfare Assistant) was approved as recently as 2009. For each level in each cadre the tasks and responsibilities are specified and also the number of years of satisfactory service after which an individual staff may be eligible for promotion to a higher level. For public servants in any Ministry or Department the scheme of service is a document which provides guidance to the day to day performance of official duties and responsibilities and links such performance to prospects for future advancement.

The assessment noted that 25 social welfare workers (71%) interviewed are not familiar with the scheme of service although they know about its existence. Social welfare workers who confirmed that they are familiar with the scheme of service did not demonstrate such familiarity when asked to explain or describe it. Seven social welfare workers (20%) could not respond, while others provided varied explanations.

Social work training curricula and programmes should provide for the levels of qualifications and awards demanded in the scheme of service, short of which it might lead to bottlenecks in the human resource management for social welfare workers. The majority of social welfare workers (63%) interviewed during the assessment could not confirm such consistency or otherwise, a situation which may not be surprising given the general ignorance about the scheme of service in the first place.

**TABLE 8: HOW THE SCHEME OF SERVICE FACILITATES PERFORMANCE OF RESPONSIBILITIES.**

	<b>Frequency 39</b>	<b>% of respondents</b>
It explains the responsibility of social workers	4	10
It provides projects guidelines	3	8
To attend social cases from doctors	1	3
N/A	31	80

**Source:** SWW Assessment Findings, 2012

When asked how they thought the scheme of service facilitated their work, only 10% of the respondents mentioned that it explains the responsibility of social welfare workers. The overwhelming majority (80%) were either ignorant or not sure about how the scheme of service assists social welfare workers to perform their roles, something which could be attributed to the fact that most of them have not had access to the scheme of service and therefore do not know its content. (Table 9)

Furthermore Social welfare workers who were apparently conversant with the scheme of service were asked to indicate whether they found it to be comprehensive enough to accommodate their professional expectations and career aspirations. They cited what they considered as deficiencies in the scheme of service, including the fact that there are a few social workers compared to the existing public demand and that social welfare workers do not have a department of their own at the district level. .

Most of the respondents in question (62%) did not know or were not sure about what they thought of the scheme of service.

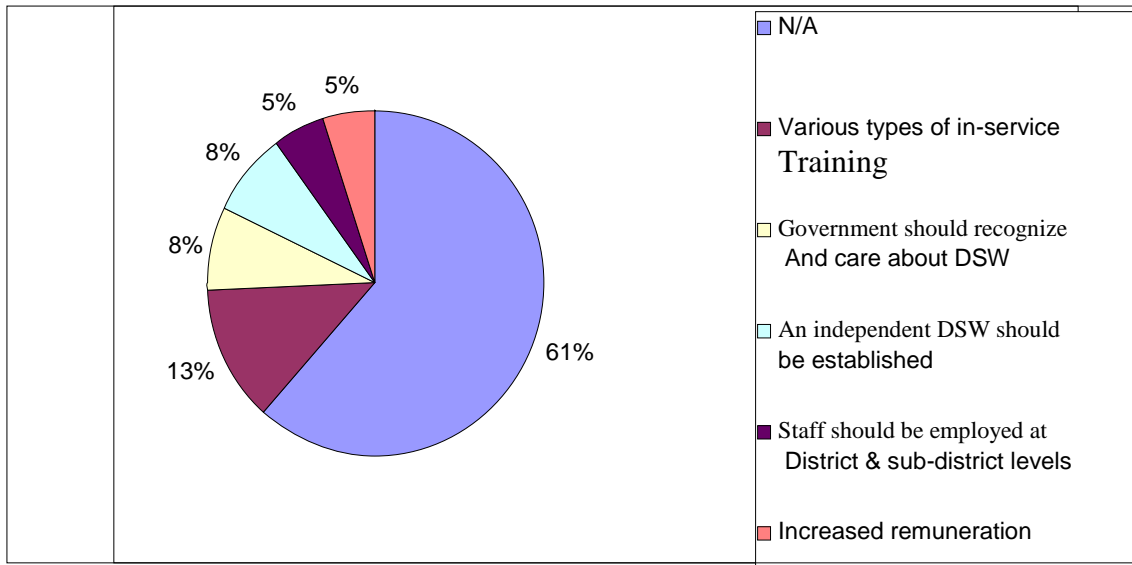
**TABLE 9: DEFICIENCIES IN THE SCHEME OF SERVICE.**

	<b>Frequency</b> <b>39</b>	<b>% of respondents</b>
N/A	24	62
Structural differences between civilian and prisons institutions	4	10
Structural deficiencies between political set ups and financial resource realities	4	10
Few social welfare workers compared to public demand	2	5
Inconsistency between social welfare and health cadres	2	5
Social welfare cadres do not have a specific department at the district level	1	3
No provision for training after employment	1	3
No independent budget for social welfare	1	3

**Source:** SWW Assessment Findings 2012

The possibility that the scheme of service might be perceived by some social welfare workers as being deficient was linked with what should be done to improve it if that turned out to be the case. In responding to this question some social welfare workers (13%) indicated that various kinds of in-service training should be provided, while others (8%) mentioned the need for the government to extend more recognition and care for the work of the Department of Social Welfare . Most respondents (61%) did not know or were not sure about what needs to be done, a position which is consistent with the fact that they were not familiar with the scheme of service. (Figure 2)

**FIGURE 2: WHAT SHOULD BE DONE TO IMPROVE THE SCHEME OF SERVICE?**



Source: SWW Assessment Findings 2012

### 8.3.6 Job description and consistency with actual work

Job descriptions lists the specific official tasks an employee is obliged to perform in keeping with ones' employment contract and for which one is accountable to the supervising authorities. Job descriptions are derived from generic scheme of service. Staff efficiency and effectiveness are enhanced when and if tasks specified in job descriptions are consistent with individual's training, experience and work expectations.

Most of the social welfare officers (87%) interviewed during the assessment has confirmed that they do possess a job description, while 8% reported that they did not have one and others (5%) were not sure

The fact that most social welfare workers do possess a job description implies that they are conversant with their expected roles and responsibilities a situation which in principle promotes a sense of responsibility and accountability. It should be noted however that there are some few of them who do not have a job description, suggesting that they are assigned tasks in an ad-hoc manner by their supervisors. In the absence of a job description staff may not have a clear understanding of what is expected of them and assessment of work performance may be

complicated. Most of the respondents who mentioned that they did not have job descriptions expressed dismay in this regard.

As shown on Table 10. Most social welfare officers interviewed (83%) find their job descriptions to be consistent with the day to day official tasks they actually do. Some of them (12%) have indicated that the tasks they do are not consistent with what the job description actually says. While no explanations were provided for the discrepancies it is understood that often supervisors do assign additional albeit unforeseen tasks to staff possibly on account of shortage of staff, or when a given individual is probably the only person with the necessary experience to handle a given assignment.

**TABLE 10: CONSISTENCY BETWEEN JOB DESCRIPTION AND ACTUAL WORK.**

	Frequency 105	% of respondents
Consistent	87	83
Not consistent	13	12
Not sure	5	5

**Source:** SWW Assessment findings, 2012

### **8.3.7 Consistency between job description and professional competency**

Equally important is the fact that job descriptions should as much as possible corresponds with the qualifications and experience of the individual staff. The assessment has found that for most social welfare workers (90%) there is no mismatch between the tasks spelt out in their job descriptions and their respective professional competencies. Such is not the case for some relatively few staff (9%) who indicated that the tasks they did were not corresponding with their professional competence.

### **8.3.8 Labour mobility**

As many as 45 of the respondents indicated that they have remained with the current employer for more than 10 years of time while some (43%) have changed employers for the major reason that they found a better paying job. Limited staff turnover could be explained by the relative specialization in the field of social work on the one hand and the generally low demand for social welfare workers in previous years on the other. The majority of the respondents (75%) who

reported having had a different employer previously did not specify the reasons for quitting. Other reasons cited include a search for training opportunities (2%) and the job security usually associated with government service (2%).

### 8.3.9 Resignation from work in the past 5 years

There have been few cases of resignation by social welfare workers in the four target regions during the past five years, except for 2009 and 2010 when there has been a sharp increase of 14 social welfare workers (67%) and seven (7) which is 24% respectively as shown on Table 11. The assessment could not establish the reasons for such increase in the number of resignations for the years in question, but the explanation could be that a considerably big number of social welfare workers opted to look for alternative employment.

**TABLE 11: INCIDENCE OF RESIGNATIONS IN THE PAST FIVE YEARS.**

<b>Years</b>	<b>Frequency</b> <b>24</b>	<b>% of respondents</b>
2007	1	3
2008	1	3
2009	14	67
2010	7	24
2011	1	3

**Source:** SWW Assessment findings, 2012

### 8.3.10 Staff Promotions

The assessment has established that 38% of the social welfare staff interviewed do not know or remember when they were last promoted. Others (18%) reported that they do not remember while 12% declare that they had never been promoted. There were also some (4%) who were last promoted between 2002 and 2003. (Table.12). Since a promotion is something that most employees look forward to, it would seem strange that some staff would have no idea about whether they had been promoted or not as well as the timing of the promotion. For those who cannot remember their last promotion, the likely interpretation may be that it is too long ago to remember.

When asked whether their promotion was timely, only 14% answered in the affirmative, with 33% indicated that promotions are usually delayed, and 53% did not know whether or not it was timely.

**TABLE 12: STAFF PROMOTION.**

<b>Year of last promotion</b>	<b>Frequency 100</b>	<b>% of respondents</b>
2002	2	2
2003	2	2
2007	13	12
2008	7	7
2009	5	5
2010	8	8
2011	3	3
Never	13	12
Don't remember	19	18
Don't know	40	38

**Source:** SWW Assessment findings, 2012

### **8.3.11 Work supervision and assessment**

The assessment intended to establish the extent to which social welfare workers and the social welfare delivery systems as a whole are subject to the management principles of responsibility and accountability along administrative and supervisory lines. Awareness by individual social welfare workers of supervisory mechanisms and associated expectation in terms of their respective roles and responsibilities were considered to be significant indicators of their own job satisfaction and also effectiveness and efficiency in service delivery at the level of the employer institutions.

As shown on table 13, most of the respondents (61%) have confirmed that a supervisory mechanism does exist, while 26% stated that such a mechanism does not exist, meaning generally that there was no systematic and regular practice through which they were assigned tasks by their supervisors and a requirement for feed-back through some form of reports. This has been confirmed by some of the respondents as being the case generally with the social welfare staff in the field



**TABLE 13: EXISTENCE OF A SUPERVISORY MECHANISM FOR SOCIAL WELFARE SERVICES DELIVERY.**

	Frequency 39	% of respondents
Supervisory mechanism exists	24	61
Supervisory mechanism does not exist	10	26
Not sure	5	13

**Source:** SWW Assessment findings, 2012

The fact that most of the social welfare workers (41%) were not sure of what supervisory tools there are may be an indication of ignorance or limited understanding of supervision itself possibly due to limited exposure to it. Staff subjected to routine, rigorous supervision would under normal circumstances be familiar with supervisory tools. Other respondents mentioned just one tool, including OPRAS (21%), timely submission of periodic reports (18%) M&E activities (13%) and daily and weekly work-plans as shown on Table 14.

**TABLE 14: SUPERVISORY TOOLS FOR SOCIAL WELFARE SERVICES DELIVERY.**

	Frequency 39	% of respondents
Not sure	16	41
OPRAS	8	21
Timely submission of periodic reports	7	18
M&E, activities	5	13
Daily and weekly work-plans	3	8

**Source:** SWW Assessment findings, 2012

Limited understanding of the practice of supervision was further confirmed when respondents were asked to mention measures needed to improve supervision and evaluation of work performance in social welfare service delivery. As many as 46% indicated that they did not know what such measures might be. Others cited regular follow-up by supervisors (13%) timely submission of reports (13%), improvement of work environment (10%) and the sensitization of social welfare workers on their responsibilities (6%) as shown on table 15.

The need for DSW to have its own officer in charge within the LGA, the need to increase number of social welfare workers and more in-service training have been mentioned also as

measures which would lead to improved supervision and evaluation. It may be concluded that both LGAs and the DSW need to review the existing supervisory structures and practices with a view to identify challenges and gaps that need to be addressed

**TABLE 15: MEASURES FOR IMPROVING SUPERVISION AND EVALUATION OF WORK PERFORMANCE IN SOCIAL WELFARE SERVICE DELIVERY.**

Proposed measures	Frequency 39	% of respondents
Don't know	18	46
Regular follow-up	5	13
Submission of reports	5	13
To improve work environment	4	10
Sensitize social welfare workers on their responsibility,	2	6
Department should have its own officer in charge in the LGA	2	5
Number of social welfare workers should be increased	1	3
More in-service training	1	3
Transport should be provided	1	3

**Source:** SWW Assessment findings, 2012

### **8.3.12 Institutional performance targets for staff.**

Setting of Institutional work targets or performance goals is a strategic way of linking the efforts and commitment of individual staff with the attainment of the objectives of any institution. The assessment sought therefore to establish whether social welfare service institutions do set such targets, and the extent to which staff were aware of the performance targets set for them. Most of the respondents (62%) have indicated that they are aware about such performance targets while 28% said that they were not aware and 10% were not sure.

### **8.3.13 Knowledge about staff performance targets.**

Lack of awareness among staff about institutional performance targets might imply that deliberate measures are needed on the part of the management to sensitize staff about such targets if at all they exist. In case they do exist but are not known to individual staff the prospects for their achievement may not be there. When asked whether they knew what their respective performance targets were, 90% of the respondents indicated that they did not know.

### 8.3.14 Policies and Guidelines governing the delivery of social welfare services.

Staff ability to identify policies and guidelines which govern their work is a critical indication for their individual effectiveness in task performance. The assessment intended to establish the extent to which social welfare staff was knowledgeable about policies and guidelines relevant to their work. Individual respondents listed a few policies and legislations as shown on Table 14. What is remarkable however is that 31% of the respondents did not know or were not aware of such policies, laws or guidelines. The assessment could not determine whether such ignorance about laws and policies is a problem which exists only among social welfare officers or whether it cuts across the e civil service in general. It however has to do with limited distribution and dissemination of policy documents on the one hand, and or the reluctance on the part of staff to read the documents. There is need for staff to be availed with policy documents and to have these presented or discussed in training workshops as part of capacity building.

Being generally uninformed about policies, laws and guidelines as they seemed to be judging from their responses, it is not surprising that that up to 49% of the respondents indicated that they did not know or were not sure whether the relevant policies and guidelines were being implemented. (Table16) Others (26%) reported that the policies were being implemented to a large extent and 23% thought that it was only to a limited extent that they were being implemented.

**TABLE 16: LIST OF POLICIES AND LAWS AND GUIDELINES WHICH GOVERN DELIVERY OF SOCIAL SERVICES.**

	Frequency 35	% of respondents
Child dev. Policy, Child Act and sexual offences Act	11	39
Don't know/not sure	12	31
Policy on ageing, child dev. policy, policies on adoption and day care centers and day care centers	6	16
Marriage Act, Disability Act, the elderly	1	3
Health Policy	1	3
Inheritance Law, marriage Act	1	3
CRC	1	3
National coasted plan For MVCs	1	3
TASWA Guidelines	1	3

**Source:** SWW Assessment findings, 2012

**TABLE 17: IMPLEMENTATION OF POLICIES, LAWS AND GUIDELINES.**

	Frequency 39	% of respondents
Don't know/not sure	19	49
To a large extent	10	26
To a limited extent	9	23
In daily work routines	1	3

**Source:** SWW Assessment findings, 2012

### 8.3.15 Further Training.

*"..Although some guidelines/standards/policies have been developed, there has been limited dissemination. Feedback from stakeholders reflect little understanding of the work of the department and government Ministries declare that access to the tools at the central and district level is very limited and therefore this affects implementation. Stakeholders see this major weakness."(Capacity Assessment of DSW - UNICEF (2009)*

The assessment's findings show that up to 90% of the social welfare workers interviewed are keen to receive further training for varied reasons, including to enable them to become eligible for promotion or simply to perform more efficiently the tasks they are currently assigned to do. Types of training preferred include re-fresher courses, training workshops and post-graduate studies in social work. Concerns were expressed by the respondents that the DSW was not doing enough as far as staff development for its workforce is concerned.

The reason cited for the need for further training is to increase social work professional skills for more efficiency at work. The primary underlying factor prompting such demand however, could be associated with perceived challenges in the current work portfolios of most social welfare workers, something which might be confirmed or otherwise through performance appraisals at the level of individual workers.

### 8.3.16 Knowledge about and membership to TASWA.

Professional associations do play an important role in enhancing a member's professional development and advancement through sharing with and learning from colleague's knowledge and information relevant to the profession. The Tanzania Social Workers' Association (TASWA)

provides such a forum where social welfare workers in Tanzania. The assessment sought to find out whether the social welfare workers interviewed were members of the association. As shown on Table 18, 55% indicated that they were TASWA members. Most of those who had not joined the organization cited the reason as being the fact that they had not been invited by TASWA leadership

**TABLE 18: TASWA MEMBERSHIP**

	<b>Frequency 105</b>	<b>% of respondents</b>
Yes	58	55
No	34	32
N/A	13	13

**Source:** SWW Assessment findings, 2012

The assessment has established through field interviews, that given the importance of social work professional associations in enhancing knowledge and competency based practices, TASWA in partnership with the DSW and the National Association of Social Workers (NASW), a membership organization of social workers in the United States of America is initiating the establishment of a Social Work Council to primarily register social workers and regulate the practice of the profession, including social work education and training in the country.

The Council will also help to raise public awareness on the role of social workers and promote their unity in addressing the complex social problems, including HIV/AIDS, facing the country. The TASWA –NASW partnership also envisions to facilitate the process of review and development of Bachelors and Masters Degree training programs to ensure that they meet the local and international standards of social work education. To that effect a body referred to as TESWEP (Tanzania Emerging Social Work Education Programs) has been formed. The body will review and update curricula of all schools offering or intending to offer social work training so as to make them meet the required standards. The end result of these initiatives is expected to be an increase in the production of knowledgeable, skilled and competent social workers.

### 8.3.17 Financial and material resources for administration of social welfare services.

Adequate funding is required to cater for provision of social welfare services to various client groups. This is more so due to the fact that most of the social welfare service recipients are marginalized with little or no income. Discussions with social welfare staff across the board as well as different client groups suggest that service provision in social welfare offices has significantly deteriorated due to lack of enough funding. Responses to the question on budgetary allocation show that 86% of the respondents were working under severe budgetary constraints. Others respondents mentioned variously that they were not involved in budget preparation, used their own money to follow up cases, experienced delay in disbursement and that when they prepared budgets the social welfare activities end up not being allocated any funding.

Besides lack of meaningful services to client groups the social welfare workers themselves are helpless and need urgent attention. Social welfare officers working in regional social

welfare offices have during the interviews, lamented over lack essential furniture like tables and chairs for staff and clients, computers, stationary and the like. Office accommodation is also poor with offices located in remote dilapidated buildings some of which are condemned. Services in long term care facilities is poor with essential amenities missing as officers in charge wait for months on end for disbursement which never come or is always inadequate, as confirmed during on-site visits by the assessment team during fieldwork.

A typical example of this situation is Bukumbi home for the elderly in Mwanza region where up to the time of this assessment , six months into the fiscal year, not a single cent was disbursed, forcing the supplier of food items to stop supplies due to non- payment of outstanding bills. This researcher visited the food store and saw two and a half bags of flour and half a bag of beans. Asked how the situation was managed the officer in charge said he was forced to request assistance from the Missionaries of Africa, a church NGO operating in the area. However the

**FGD with the elderly at Njoro home for the elderly, Moshi municipality**

**Participant X:** "...the few staff here work very hard in this difficult place. As you can see, the buildings are very old and some doors are broken, the toilets are overflowing. This center is not fenced and it is very dangerous since thugs and drunkards trespass as they wish during the night. We get no support from Moshi municipality. We have no transport, and you can imagine what happens if anyone of the elderly here falls sick at night,

supplies were not enough to meet the needs of over 300 residents of the center. The situation in other government- run long term care facilities seems to reflect a similar scenario. In FGDs conducted at Bukumbi (Mwanza), Njoro (Kilimanjaro) and Nunge (Dar es salaam) the service recipients variously said, “food is insufficient”, “ no electricity, the institution is unable to buy LUKU”, “ water supply system has broken down, no water in dormitory’s toilets” and “services provision deteriorates over the years”.

## **9.0 Discussion and Analysis of the findings**

### **9.1 Deployment of Social welfare workers**

It can be deduced from the findings, that the demand for social welfare services is primarily a function of population growth and rate of urbanization and that local government authorities need to accommodate this reality especially in their long term planning. According to the DSW capacity assessment report, in September 2008, through circular no CHA.215/355/01/87, the Principal Secretary, PMO-RALG informed all Directors in District Councils, Municipal Councils and City Councils to start employing at least 4 Social Welfare Officers to work in each of the three units in the Social Welfare Department structure, namely the Family, Child Welfare and Early Childhood Development; Juvenile Justice and Disability and Aging, effective 2009/10 financial year.

In the same circular, the Government directed that Social Welfare Officers located in Regional Secretariats be transferred to local governments. The objective of the process is to bring social welfare service closer to communities in keeping with the Decentralization by Devolution. The assessment could not establish the progress made so far towards the implementation of the directive or whether there was a timeline given.

Given the fact that the recruitment and placement for human resources is now the responsibility of the local government, the challenge remains that of implementation and co-ordination since most councils lack professionals to effectively carry out the function.

### **9.2 Training, Co-ordination and supervision**

Social welfare workers interviewed expressed concern over limited communication and feedback from headquarters of the social welfare department and weak supervision in general. Such concern is in line with the observation of the DSW capacity assessment, to the effect that

supervision is one of the weakest roles in the department. The report notes that institutions dealing with elderly and orphans are not supervised, monitored or followed up to determine adherence to standards.

Inadequate communication and feed-back could be associated with a scenario in situations where authority is centralized and there might not be a strict supervision of staff and activities in the field. It may be the case also where the headquarters is overwhelmed with numerous tasks in the face of limited staff, such as is the case with the DSW. The absence of supervision generally means also lack of or inadequate assessment

The assessment's interpretation of these concerns is that Social welfare officers and other technical staff expect guidance and mentoring from the department leader but this seems to be not forthcoming and therefore efficiency and effectiveness is compromised. The Supervision of services delivery goes alongside inspection, a role that needs to be decentralized to the local government level where the service providers are. DSW needs technical capacity in this regard, in terms of the development of inspection guidelines and their dissemination.

The need for training in order to enhance professional knowledge and skills and knowledge among the social welfare workforce has come up consistently during the assessment, with individual social welfare workers indicating that they have never undergone any training since they were employed by DSW. Training needs to be looked at also in the context of staff development programs, which along with performance appraisal need to be given priority since they are so relevant in not only motivating employees, but also as sources for acquisition of knowledge and skills to match the changing pace in the work environment

The unusually high demand for further training might be a result of a dislodge between work requirements and the recruitment criteria, so that experience levels do not correspond with job descriptions. The changing and expanding social welfare clientele systems do create the demand for additional skills and knowledge on the part of individual workers, something which can only be confirmed through a training needs assessment. A staff development or training plan would be essential in this regard



### **9.3 Services to vulnerable groups**

The goals of the DSW Strategic Plan (2007 -2011) included ensuring the planning and budgeting processes which would strategically capture interventions that would change the cause of provision of social welfare services in the country. The plan intended to achieve the integration of services so that resources are strategically mobilized and targeted to maximize the impact on the lives of the vulnerable communities and individuals. The current quality of services to vulnerable groups in the service centers visited by the assessment gives the impression that the goal is yet to be achieved

Social welfare workers stationed in some of the centers providing services to vulnerable groups have informed the assessment that services for the elderly and people with disability get the least priority in terms of budget allocation, an assertion which calls for a common strategy within the DSW in addressing vulnerability issues especially in terms of resource mobilization and allocation.

General frustration with the increasingly poor quality of services to vulnerable groups in the centers run by DSW, with staff suggesting that these institutions should be handed over to the local government authorities. It is the view of the assessment that the take-over by LGAs would be consistent with the decentralization process. The assessment was informed that some LGAs were in fact already extending material support to such centers, including the Moshi Municipality in the case of the Njoro home for the elderly.

### **9.4 Personnel management concerns.**

The assessment has established that there is inadequate awareness or complete ignorance about individual's staff promotion, which might be linked to limited access to the scheme of service as already evidenced by the findings. There is no doubt that when given timely and also communicated to concerned staff a promotion would boost morale and enhance efficiency in task performance and therefore safeguard against apparent apathy on the part of the staff

Ignorance about the scheme of service among social welfare workers on the other hand, suggests that there are no deliberate measures by the employers to educate and inform staff

about such an important document, or, that individual social welfare workers might not have seen the need to enquire or even demand to have access to the scheme of service.

Staff morale among social welfare workers employed by DSW was found to be generally low, as captured when social welfare workers were responding to questions on promotions, job descriptions, supervision and budgetary constraints, as well as when giving their varied general comments on the situation of social welfare workers in the country. When asked about what they thought needs to be done the respondents suggested variously that their work environment should be improved, that social welfare workers should be valued and recognized and that the social welfare functions in the LGAs should not be mixed up with those of community development. They added that social welfare workers currently employed by the DSW should be absorbed in the LGAs where the work environment seems to be better particularly in terms of office space and equipment.

Addressing the question of staff morale the DSW capacity assessment report (2008) notes that there is room to motivate them more, and cites measures like employees involvement in discussing problems and solutions to their work challenges, receiving recognition and sharing. Consistent with the field findings of this assessment, the report notes also that there is need to institute a performance management system in order to achieve a clear performance management direction, something that individual employees need to stay focused on the strategic goals.

The assessment has established that job descriptions are not always reflecting the day to day tasks of individual social welfare workers and that they need regular revision. Acquainting staff with relevant policies and laws and to build capacity on the evaluation of policy implementation is also a measure for enhancing staff morale. Since the staff are the ones responsible for implementing policies on day to day basis it may not seem comprehensible that the same staff would not be sure about whether or not they were being implemented.

Both The Tanzania Social Workers Association (TASWA) as well as the envisioned Social Workers' Council do provide room for increased public recognition of professional social workers

in the country, a recognition that would boost the status of the profession and impact positively on the delivery of social welfare services.

## **10.0 Conclusions**

- Review of laws and policies related to the provision of social welfare services in Tanzania confirms the existence of a solid policy and legislative framework, which demonstrates the government' commitment and political will to extend social protection to all vulnerable groups
- Up to 69 % of the social welfare workers in the areas covered by the assessment have expressed lack of knowledge of various laws and policies related to their work, a situation which most likely exists in other areas as well.
- While existing national policies and laws are generally supportive of social welfare services in the country, gaps still exist in translating these documents into actions among those entrusted to implement them including social welfare officers.
- The assessment has established the apparent confusion between the roles of social welfare workers and community development workers particularly at the level of LGAs
- Service delivery is primarily constrained by unqualified social welfare workers in almost all field offices up-country. Many of these offices have hardly two (2) qualified social workers in comparison to the high case loads they attend to. Field situations show that in some stations, even office messengers/ attendants attend clients in the absence of social welfare officers.
- The level of responsibility and accountability among most of the social welfare workers is generally low, something which might undermine staff motivation and morale
- Most social welfare workers have expressed the need for further training
- Centres providing shelter and other services to vulnerable groups are poorly resourced in every respect while staff are frustrated by the poor work environment. Old and dilapidated buildings and lack of basic needs such as food, makes the centres not conducive for services and rehabilitation
- Budget limitations is a persistent and chronic problem with the Social Welfare Department, and it makes the work of the concerned social welfare officers very difficult and frustrating

## 10.1 Recommendations.

- It is recommended that the Ministry of Health and Social Welfare in collaboration with stakeholders take deliberate measures to disseminate and distribute relevant policy documents and subsequently undertake regular reviews and trainings targeting social welfare workers
- The Ministry of Health and Social Welfare in collaboration with stakeholders undertake capacity building targeting social workers to enhance their capacity on responding to the need of the general public at local government levels.
- That in collaboration with stakeholders more social workers are trained/ recruited,
- The government should recruit more social welfare workers to work in collaboration with CDOs at LGA to village extension levels.
- Formulate strategies for developing a social welfare policy which will define all elements of social welfare service provision need to be laid.
- The government (MoHSW & PMO-RALG) should streamline the roles and functions of social workers and CDOs.
- The Department of Social Welfare should take the lead in lobbying for “Social protection” framework that will give them more visibility. The lobbying should be based on facts.
- That the Ministry of Health and Social Welfare in collaboration with stakeholders embark on a comprehensive training programme to further build the capacity of Staff at all levels
- The ISW should embark on the training of multi-skilled social workers to respond to the needs of various client groups
- MoHSW should re-introduce induction courses to new employees.
- That the Department of Social Welfare takes measures, in collaboration with stakeholders to streamline and improve supervisory lines and make these known to the staff, who should also be provided with schemes of service and participate in the development of work performance targets.
- That the Ministry takes urgent measures to improve the situation of long term care facilities or negotiate with LGAs to take over and run such centres.
- That the Ministry of Health and Social Welfare establishes the factors behind the perennial problem of limited budget and finds both short and long term solutions.

**ANNEX 1: INSTITUTIONS VISITED AND NUMBER OF INTERVIEWS IN EACH TARGET REGION.**

<b>Region/districts</b>	<b>Stakeholder institution</b>	<b>NGOs</b>	<b>Number of interviews</b>
Dar Es Salaam Region (Ilala, Kinondoni, Temeke Municipalities)	Institute of Social Work; Department of Social Welfare; Temeke Municipal Council ; Ilala Municipal Council;; Ilala Municipal Hospital;; Kinondoni Municipal Council; Muhimbili Hospital; Remand home; Kurasini Children's Home; Mwananyamala hospital; Amana hospital Temeke hospital	KIWOHEDE;; Dogodogo Centre; Missionaries of Charity WAMATA; Youth Counseling Rehab. Centre; Salvation Army PASADA; Al-Alqaam	<b>72</b>
<b>Total</b>	<b>12</b>	<b>09</b>	
<b>Mwanza Region</b> (Mwanza city, Geita & Magu districts)	RAS; Mwanza City Council; Butimba Prison; Municipal Council;Municipal Hospital; Magu district council;; Geita district council; Bugando hospital,; Regional prisons officer Regional Social Welfare Officer; Sekou Toure hospital; Magu prison; Geita district social welfare office; Magu district social welfare office; Magu district hospital Geita district hospital; Bukumbi home for the elderly	Starehe children's home TUMAINI, KULEANA, Busega, Bethany children's home Baylor Institute	<b>34</b>
<b>Total</b>	<b>17</b>	<b>08</b>	
<b>Lindi Region</b> (Lindi Municipality Nachingwea, & Kilwa districts)	RAS; Lindi Municipal Council; Nachingwea district council; Kilwa district council; Sokoine regional hospital; Regional prisons office; Lindi district Council; Nachingwea district hospital; Kilwa district hospital	LIWOPAC Huruma Women Foundation NAWODA; Pemwa; Shikwauki	<b>25</b>
<b>Total</b>	<b>09</b>	<b>06</b>	
<b>Kilimanjaro Region</b> (Moshi Municipality, Rombo and Same districts)	RAS; Moshi Municipality; Rombo district council; Same district council; Prisons Department; KCMC Hospital Mawenzi hospital; Kisangara Training centre; Mkombozi Centre	Red Cross; KIWAKUKI Kinshai Home; Amani Centre Kuyeko Legal Aid & Counseling Rainbow Centre; Save the children	<b>23</b>
<b>Total</b>	<b>09</b>	<b>08</b>	<b>154</b>

**ANNEX 2: SUMMARY OF SOCIAL WELFARE WORKERS CURRENT LABOUR FORCE**

NO	REGION	DISTRICT	EMPLOYER		
			MoHSW	LGA	TOTAL
1	<b>Dar es Salaam</b>	Ilala	4	6	<b>61</b>
		Temeke	6	1	
		Kinondoni	8	5	
	DSW headquarters	31			
	<b>TOTAL</b>	<b>18</b>	<b>12</b>		
	RWO'S		1	-	1
2	<b>Dodoma</b>	Chamwino		1	<b>11</b>
		Municipal		7	
		Kondoa		2	
		Mpwapwa	1	-	
	<b>TOTAL</b>	<b>1</b>	<b>10</b>		
	RSWO'S		2	-	2
3	<b>Coast</b>	Bagamoyo			<b>6</b>
		Kibaha			
		Kibaha Rural			
		Kisarawe	2	-	
		Rufiji			
		Mafia			
	<b>TOTAL</b>	<b>4</b>	<b>6</b>		
	RSWO'S		5		5
4	<b>Singida</b>	Singida		8	<b>17</b>
		Iramba/Kiomboi	1		
		Manyoni	5		
	<b>TOTAL</b>	<b>6</b>	<b>11</b>		
	RSWO'S		2		2
5	<b>Iringa</b>	Municipal Rural			<b>22</b>
		Kilolo			
		Makete	1	3	
		Mufindi			
		Njombe			
	<b>TOTAL</b>	<b>1</b>	<b>22</b>		
	ROSWO'S		3		3
6	<b>Mtwara</b>	Mikindani			<b>6</b>
		Mtwara Rural			
		Newala			
		Tandahimba			
		Masasi			
	<b>TOTAL</b>	<b>1</b>	<b>5</b>		
	RSWO'S			1	1

7	<b>Rukwa</b>	Mpanda		3	
		Nkasi		2	
	<b>TOTAL</b>		-	<b>5</b>	
	<b>RSWO'S</b>		1		1
8	<b>Tanga</b>	Tanga		2	
		Lushoto	1	2	
		Muheza		2	
		Handeni		2	
		Korogwe	3	10	
	<b>TOTAL</b>	<b>4</b>	<b>16</b>		
<b>RSWO'S</b>		4		4	
9	<b>Kilimanjaro</b>	Moshi	1	1	
		Moshi Urban		8	
		Siha		2	
		Rombo	1	2	
		Mwanga	1	1	
		Same	2	2	
		Hai	2	4	
	<b>TOTAL</b>	<b>6</b>	<b>21</b>		<b>27</b>
<b>RSWO'S</b>		5		<b>5</b>	
10	<b>Arusha</b>	Monduli		2	
		Ngorongoro		4	
		Arusha		2	
		Karatu		2	
		Longido		1	
		Arusha		3	
		Mbulu	1		
	<b>TOTAL</b>	<b>1</b>	<b>14</b>		<b>15</b>
<b>RSWO'S</b>		3		<b>3</b>	
11	<b>Mbeya</b>	Mbeya City council		7	
		Mbeya		2	
		Mbalali		1	
		Kyela		1	
	<b>TOTAL</b>			<b>11</b>	<b>11</b>
<b>RSWO'S</b>		4		<b>4</b>	
12	<b>Tabora</b>	Tabora Municipal		1	
		Sikonge		3	
		Uyui		1	
	<b>TOTAL</b>			<b>5</b>	<b>5</b>
<b>RSWO'S</b>		4		<b>4</b>	
	<b>Mwanza</b>	Mwanza City cancel		10	
		Ukerewe		1	
		Misungwi	1	2	
		Kwimba		3	
		Geita	2		
	<b>TOTAL</b>	<b>3</b>	<b>16</b>		

13					<b>19</b>
	RSWO'S		5		<b>5</b>
14	<b>Shinyanga</b>	Bukombe		2	<b>10</b>
		Bariadi		1	
		Meatu		5	
		Kahama		1	
		Shinyanga Rural		1	
	<b>TOTAL</b>			<b>10</b>	
	RSWO'S		5		<b>5</b>
15	<b>Kigoma</b>	Municipal council		1	<b>6</b>
		Kasulu		3	
		Kibondo		2	
	<b>TOTAL</b>			<b>6</b>	
	RSWO'S		2		<b>2</b>
16	<b>Ruvuma</b>	Songea Municipal		5	<b>8</b>
		Namtumbo		2	
		Tunduru	1		
	<b>TOTAL</b>		<b>1</b>	<b>7</b>	
	RSWO'S		<b>5</b>		<b>5</b>
17	<b>Morogoro</b>	Kilosa	<b>3</b>	1	<b>22</b>
		Ulanga		3	
		Morogoro Rural		1	
		Morogoro		4	
		Kilombero		5	
	<b>TOTAL</b>		<b>5</b>	<b>14</b>	
	RSWO'S		3	0	<b>3</b>
18	<b>Kagera</b>	Bukoba Rural	2		<b>13</b>
		Misenyi			
		Chato			
		Biharamulo	1		
		Karagwe	1		
		Ngara	2		
		Muleba	1		
	<b>TOTAL</b>		<b>7</b>	<b>6</b>	
	RSWO'S		1		
19	<b>Manyara</b>	Babati Town council		1	<b>10</b>
		Babati		2	
		Mbulu		5	
		Hanang		1	
		Kiteto		1	
	<b>TOTAL</b>			<b>10</b>	
	RSWO'S				
		Municipal Council		1	
		Lindi		2	



20	<b>Lindi</b>	Nachingwea		2	<b>5</b>
	<b>TOTAL</b>			<b>5</b>	
	RSWO'S		1		
21	<b>Mara</b>	Bunda		1	<b>3</b>
		Serengeti		1	
		Tarime		1	
	<b>TOTAL</b>			<b>3</b>	
	RSWO'S		2	<b>215</b>	
<b>GRAND TOTAL</b>			<b>60</b>		
			<b>59</b>		

NB. REGIONAL SECRETARIAT	21
CENTRAL GOVERNMENT	90
LGAs	218
CENTRAL GOVERNMENT LOANED TO LGAs	60
<b>GRAND TOTAL</b>	<b>389</b>

Source: MOHSW (DSW), 2012

**ANNEX 3: TABLE 10 SOCIAL WELFARE OFFICERS FUNCTIONS.**

<b>Family and Child Welfare and Day Care Centre Services</b>	<b>People with Disabilities and the Elderly</b>	<b>Probation Services and Juvenile Justice</b>
<p>To work with communities in order to identify family related social problems.</p> <p>To enable communities to achieve self support, improvement and be able to link with other financial agencies.</p> <p>To coordinate the process of social change that:</p> <p>Promote the wellbeing of the communities as whole and that of the disadvantaged groups within it.</p> <p>To facilitate the improvement of health, education, housing, employment, living standards and safety.</p> <p>To contribute to the sustenance of cultural development and environment.</p> <p>To map out key actors who are responsible for the provision of basic social services in the areas.</p> <p>To mobilize influential secondary actors to provide support at both district and wards levels /who has the potential and the capacity to mobilize resources for improving services delivery.</p> <p>To knowledgeable on available sources of resources and strategies planned for the support of the disadvantage groups from district and ward levels</p> <p>To conduct interview and undertake social Investigation to poor families and make recommendations for necessary action.</p> <p>To provide professional counseling and</p>	<p>To work with communities in order to identify social problems related to disability and ageing.</p> <p>To enable communities to achieve self support, improvement and be able to link with other financial to coordinate the process of social change that.</p> <p>Promote the wellbeing of the communities as whole and that of the disadvantaged groups within it.</p> <p>To facilitate the improvement of health, education, housing, employment, living standards and safety.</p> <p>To focus on all outcomes that brings about change to be sustainable.</p> <p>o Map out key actors who are responsible for the provision of basic social services in the area.</p> <p>To mobilize influential secondary actors to provide support and district and ward levels who have the potential and the capacity to mobilize resources for proving service delivery.</p> <p>To be knowledgeable on a available sources of resources and strategies planned for the support of the disadvantage groups from the nation District and ward levels</p>	<p>To work with communities in order to identify potential situations that can influence children to become in conflict with the law.</p> <p>To enable communities to achieve self support, improvement and be able to link with other financial agencies.</p> <p>To coordinate the process of social changes that.</p> <p>Promote the well – being of the communities as a whole and that of the disadvantage groups within it.</p> <p>To facilitate the improvement of health, education, housing, employment, living standards and safety.</p> <p>To focus on all outcomes that brings about change to be sustainable.</p> <p>To contribute to sustaining of cultural development and environment.</p> <p>To map out key actors who are responsible for the provision of basic social services in the area.</p> <p>To mobilize secondary actors who are influential and can be able to provide support at district and ward levels who have the potential and the capacity to mobilize resources for improving services delivery.</p>

guidance to families with matrimonial conflicts and single parents. To supervise and monitor the implementation of programs which uphold child rights to vulnerable children in relation to CRC (1990).		
--	--	--

**Source:** Social Welfare Department 2012

## **ANNEX 4: QUESTIONNAIRE FOR STAKEHOLDER INSTITUTIONS.**

### **INTRODUCTION:**

This questionnaire is targeted to institutions which train and employ social welfare workers in the country. Such stakeholder institutions include:

- social work/welfare training institutions
- government ministries,
- departments and agencies.
- Local government Authorities (LGAs) and
- non-governmental organizations (NGOs).

Specifically the questionnaire will be responded by the directors of studies in training institutions, heads of departments and human resource in government departments, LGAs and NGOs.

AREAS OF FOCUS FOR THE ASSESSMENT: The assessment will focus on (1) demographic information on the social welfare work force, (2) current production and capacity of social welfare work force, (3) work environment and human resources management, (4) governance /leadership (5) financial resources, and (6) monitoring and evaluation

### **A: Background Information**

1. Name of the Organization/Department/Institute/Council.....
2. Type of Organization/Government/LGA/NGO/other.....
3. location:
  - Regional
  - District
  - Ward
  - Village/Mtaa
4. Funding source
  - (i) .....
  - (ii) .....
  - (iii) .....

**B: GENERAL INFORMATION**

1. Explain the structure of then Organizing.....  
.....  
.....  
.....
  
2. List the primary functions of the organization.....  
.....  
.....
  
3. Do you employ social welfare workers in your organization YES/NO.....
  
4. Where are social welfare workers located within the structure.....  
.....
  
5. How many social welfare workers are working for the organization.....  
.....  
.....
  
6. What skills are required to perform these tasks  
.....  
.....  
.....
  
7. Do you know the skills required for Social Welfare Workers to perform their professional work?  
Yes/No.....  
If Yes, please mention them.....  
.....
  
8. What types of client does your organization serve?
  - (i) .....
  - (ii) .....
  - (iii) .....
  - (iv) .....

9. How is the work force, distributed at various stations in regard to education levels at the station given below?

STATION	PHD	MSW	MA	BSW	PGD	ADP	DIP	CERT	PARA SW	OTHER
Head Office										
Regional										
District										
Ward										
Village										
Remand Homes										
Children Homes										
Old Peoples' Homes										
Hospitals										
Others(Specify)										
TOTAL										

10. Please indicate the number of social welfare workers employed in the last five years

YEAR	PHD	MA	BSW	PGD	ADV.DIP	DIP	CERT	OTHERS
2006								
2007								
2008								
2009								
2010								
TOTAL								

B: Please Indicate the Number of social welfare workers who leave work per year in the last five years. (verify by looking at HR records)

YEAR	PHD	MA	BSW	PGD	ADV.DIP	DIP	CERT	OTHERS
2006								
2007								
2008								
2009								
2010								
TOTAL								

**Key:** PhD = Doctor of Philosophy

MSW = Masters in Social Work

MA = master of Arts

BSW = Bachelors in Social Work

PGD = Post Graduate Diploma

ADP = Advance Diploma

DIP = Diploma

10. Working environment and human resources management

(i) Are you familiar with the scheme of services for social workers?

YES/NO.....

(ii) If yes describe the provisions of the scheme.

.....  
.....  
.....

(iii) Explain whether or not it is consistent with social work professional skills

.....  
.....  
.....

(iv) Briefly explain how it does or does not enable them to meet the needs of the country's present population and social problems

.....  
.....  
.....

(v) What GAPS are there?

.....  
.....  
.....

(vi) What are possible reasons for the discrepancies?

.....  
.....  
.....

(vii) What should be done to correct the situation?

.....  
.....  
.....

(viii) Do you have service targets for performance? YES/NO ..... If Yes, are you familiar with them? .....(verify the documents )

(ix) When were the following activities for social welfare workers last conducted

ACTIVITY	YEAR	NO OF PARTICIPANTS
Orientation training		
In-service training		
Seminar/workshop		
Professional conference /meeting		

How often should they be conducted?

**9. GOVERNANCE AND LEADERSHIP**

(i) List any existing policies/laws/guidelines / you know which promote development of social welfare service delivery

.....  
.....  
.....  
.....

(ii) What kind of management and political support does this organization receive from higher administrative levels

.....  
.....  
.....  
.....



(iii) To what extent are these policies, laws and guidelines enforced /implemented?

.....  
.....  
.....

10. Are there any inadequacies in enforcement?

YES/NO.....Explain.....

.....  
.....  
.....

11. How can the gaps be addressed?

.....  
.....  
.....

**FINANCIAL RESOURCE AND EQUIPMENT**

**A: FINANCE**

(i) What is the current annual budget of the organization

.....  
.....

(ii) What constitutes the main line items of your budget?

.....  
.....

(iii) Indicate the budget allocated for social welfare services in the last five years

Year	Item	Budgeted	Allocated	Disbursed	Spent	Discrepancy	%
2006	Salaries						
	Equipment/furniture						
	Training						
2007	Salaries						
	Equipment/furniture						
	Training						
2008	Salaries						
	Equipment/furniture						
	Training						
2009	Salaries						
	Equipment/furniture						
	Training						
2009	Salaries						
	Equipment/furniture						
	Training						
2010	Salaries						
	Equipment/furniture						
	Training						

(iv) Indicate the budget support from other sources in the last five years

YEAR	ORGANIZATION	SUPPORT
2006		
2007		
2008		
2009		
2010		

**B: EQUIPMENT AND FURNITURE**

Indicate whether or not there is enough equipment in terms of:

- (i) Office furniture .....
- (ii) Office accommodation .....
- (iii) Stationery .....
- (iv) Computer and printer .....
- (v) Transport .....

12. **MONITORING AND EVALUATION**

i) Is there a monitoring plan for social welfare service delivery? Yes/No.....

ii) If Yes, elaborate the existing monitoring mechanism and tools currently in use.

.....  
.....

iii) How is social welfare performance monitored?

.....  
.....

iv) What can be done to improve monitoring and evaluation of social welfare performance at all levels?

.....  
.....

v) Explain how often the management extends supervisory support to social welfare staff at different administrative levels.

.....  
.....

vi) Explain gaps experienced between expected outcome and actual practice of service delivery.

.....  
.....

vii) Explain how quality social work practice is controlled and evaluated?

.....  
.....

13. **TRAINING INSTITUTIONS**

Production of social welfare workers

i) How many students were enrolled in the last five years.

YEAR	PHD (SW)	MSW	MA	BSW	PGD (SW)	ADP (SW)	CERT (SW)	PARA SW
2006								
2007								
2008								
2009								
2010								

How many graduated?

YEAR	PHD (SW)	MSW	MA	BSW	PGD (SW)	ADP (SW)	CERT (SW)	PARA SW
2006								
2007								
2008								
2009								
2010								

iii) Explain the relevance of training received by Social Welfare Workers to their assigned job functions.

.....

.....

.....

iv) Are there any gaps? Yes/No.....If Yes, what are they?

.....

.....

.....

v) What mechanism exists to capture employer's feedback on the training?

.....

.....

.....

vi) What about feedback from professional workers in the field?

.....  
.....

vii) What research/evaluation in the service areas have been made in the last five years?

YEAR	RESEARCH TITLE	FINDINGS/OUTPUT
2006		
2007		
2008		
2009		
2010		

viii) List core subjects covered by social work students.

.....  
.....

ix) List other (non-core subjects)

.....  
.....

x) What changes have been made in the training modules in the last five years in response to gaps?

.....  
.....  
.....

xi) Point out efforts made to train staff on the needs and relevance of different modules.

.....  
.....

**ANNEX 5: QUESTIONNAIRE FOR SOCIAL WELFARE WORKERS.**

**AREAS OF FOCUS FOR THE ASSESSMENT:** These will include (1) demographic profile of Social Welfare work force, (2) current production and capacity of social welfare work force, (3) Working environment and Human Resource Management, (4) governance/leadership, (5) financial resources and (monitoring and evaluation

**A: PERSONAL INFORMATION**

1. Name of Organization/Department/Institution/Council/Hospital you are presently working for  
.....

**Location:** Region.....  
District.....  
Ward.....

2. Station/Place of Work.....
3. Your designation/title.....
4. Level of education/Academic qualification.....
5. Professional Training.....
6. Institute/College attended and year.....  
.....
7. Academic award attained. ....
8. Do you think you need extra training for the work you do? Yes / No  
Explain.  
.....  
.....

**B: GENERAL INFORMATION**

1. Who are your clients in this organization?  
.....  
.....  
.....

2. What services do you provide?

.....  
.....  
.....

3. What are your other responsibilities?

.....  
.....  
.....

4. Do you have job a description? Yes/ No. If Not, explain

.....  
.....

5. What kind of skills is required for the work you do?

.....  
.....  
.....

6. Does your job description match with the skills you have? Yes? No.  
Explain

.....  
.....

7. If not, what are the gaps?

.....  
.....

8. Does the work you do correspond with your job description? Yes.....No.....

.....  
.....

9. If not, how do you cope with this situation?

.....  
.....

Is additional training required for the work you are presently doing? Yes/No. If Yes, please explain

.....

.....  
.....

10. In which year were you employed?

11. How long have you been at this station?

12. Mention other stations you have worked since you were employed.

a) .....

b) .....

c) .....

d) .....

13. Are you familiar with the scheme of service for Social Welfare workers? Yes / No If not, please explain

14. Have you had a different employer in the past? Yes/

14b) If Yes, for when and for what reasons did you leave your previous employer?

.....  
.....

15. How long have you been holding your present post?.....Years

16. When was your last promotion? ..... Was it timely / delayed?

Explain

.....

17. When did you attend any of the following activities?

ACTIVITY	YEAR	THEME/TOPIC
In-service training		
Seminar		
Workshop		
Conference		
Study tour (where)		

18. What should be done to further improve performance?

.....  
.....  
.....



19. Who is your immediate supervisor?

.....What  
technical support/assistance do you get from your immediate supervisor?  
.....  
.....

20. Do you face any budgetary constraints in carrying out your duties? Yes /No ----- If Yes, please mention the constraints

.....  
.....  
.....

21. a) Have you heard about the Tanzania Social Workers' Association? Yes / No....

20 ) If Yes, are you a member? Yes/NO ..... Explain.....

.....  
.....

22. What additional comments do you have regarding the Social Welfare staff in Tanzania in general?

.....

21 A general comment about this Organization/Department/Ministry/Council/hospital?

.....  
.....  
.....  
.....

## **ANNEX 6: INTERVIEW GUIDE.**

Name of Interviewee/ Key informant.....

Name of the Organization.....

Date of Interview.....

Areas to be covered in the interview:

### **1. Demographic profile of SWW**

- Strength/ categories/Placements
- How many are needed/ shortfall/ retention.
- Role of private sector in service delivery

### **2. Production and capacity of SWW**

- Quantity/quality/qualifications for service delivery
- Number of SW Training Institutions/total graduates annually/adequacy.
- Recruitment/employment of SWWs

### **3. Work environment and resource management**

- Policy and legal framework/guidelines for social workers
- Definition of roles and responsibilities.
- Job descriptions/skill sets/mismatches/ duplication
- Professional development mechanisms.

### **4. Governance/Leadership/Accountability**

- Structure of SWW/Central Govt/LGA
- Budgets
- Political/Management support to SWO
- Role of TASWA

## **5. Financial resources**

- Overall Budget allocation
- LGA SW Budgets
- HR management opportunities
- PPP and SW services

## **6. Monitoring and Evaluation**

- SW Council plans/ priorities
- Inclusion of SW indicators in M and E
- Government commitment and report re. people with disabilities and the elderly.
- MOHSW tools for reporting SW services

**ANNEX 7: OBSERVATION GUIDE.**

Name of Organization/Dept/LGA.....

Date of Observation.....

Area to be Observed	Unit of Observation
Work Environment	<ul style="list-style-type: none"><li>• Office location</li><li>• Office space</li><li>• Adequacy of work tools<ul style="list-style-type: none"><li>-Telephone</li><li>-Computer</li><li>-Furniture</li><li>-Chairs for clients</li></ul></li><li>• Toilet</li><li>• Stationery</li><li>• Professional relationship and engagement of clients.</li><li>• Confidence amongst social workers.</li></ul>

**ANNEX 8: FOCUS GROUP DISCUSSION (FGD):**

**Guiding Questions**

**Introduction**

This tool will be used to collect qualitative data in selected long term care facilities and service institutions. Such facilities and institutions include old people’s homes, training centers, children’s homes and professional staff providing a common social welfare service.

*Selected Target Groups include: children and adults “in social welfare service” centers, NGO staff, social work students, social work educators*

Site: (include region/district/ward)

Date:

Moderator:

Note-taker

Start time:

End time:

	Gender	Designation
Participant 1:		
Participant 2:		
Participant 3:		
Participant 4:		
Participant 5:		
Participant 6:		
Participant 7:		
Participant 8:		
Participant 9:		
Participant 10:		

**CHECK LIST FOR MODERATOR:**

**START**

1. Greet and check-in guests
2. At start of focus group, introduce yourself and explain your role
  - a. Introduction speech
  - b. Remind participants they will NOT be reimbursed for the focus group. They will receive reimbursement for travel only.

3. Explain confidentiality and ethical guidelines
  - a. Reiterate that confidentiality needs to be maintained between facilitators AND also among each other
  - b. Ask permission to record. Explain that the recording will ONLY be used for clarification, it will not be broadcast, no names will be used, and it will be destroyed upon completion
  - c. Remind participants they can leave at anytime and do not have to answer a question
4. Lay ground rules for FGD
  - a. Rules for speaking
  - b. Remind everyone to keep things 'civil' and respect one another
5. Explain that detailed questions can be answered at the end
6. Sync time keeping piece with note-taker

**END**

6. Finalize reimbursements
7. Debriefing
8. Expand your notes within 24 hours

## CHECK LIST FOR NOTE-TAKER

1. Greet and check-in participants:
  - ✓ Introduce yourself and explain your role
  - ✓ Assign a number/pseudonym to each participant
  - ✓ Record participants information:
    - Gender
    - “Who they are” (i.e. NGO staff, social work students, children in a remand home, etc.)
  - ✓ Obtain informed consent
2. Make sure recording equipment is set-up and ready to go + notes pages are ready
3. Create seating chart
4. Sync time keeping piece with moderator

**\*AT THE START OF EACH NUMBERED QUESTION RECORD THE START TIME\***

**\*INFORM MODERATOR IF TIME ISSUES ARISE\***

**END**

5. Finalize any reimbursements
6. Debriefing
7. Expand your notes within 24 hours

### **Section A: Nature and quality of social welfare services provided**

*Lead in:*

Which social welfare services are provided at this institution?

**Probes:**

- Do you think the services are adequate/satisfactory?
- Are the services getting better or not as time goes on?
- Is there anything you think could be done to improve the services at the centre/institution?

Time: _____min
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### **Section B Involvement and participation of client groups in service delivery and management arrangements**

- What are your roles and responsibilities in the running of the centre?
- Who supervises the provision of services at the centre?

**Section C. Relationship/interaction with external environment**

- Is the local government and the community involved in the provision of services?

**Probes:** How is it involved?

- Do you get visitors from outside?

**Probes:** Where do they come from?

How often do they visit?

- If Yes, what messages do they bring to you?
- Do you receive visitors from DSW?

**Section D. Clients' perception of social welfare staff**

- How many social welfare workers work at the centre?

**Probes:** Do you think they are enough? Can you explain? .....

Are they competent and experienced enough for the work they do here?

Time: _____min
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- National Ageing Policy (2003)
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